# United States Court of Appeals for the Second Circuit



**EXHIBITS** 

## 76-6087

UNITED STATES COURT OF APPEALS

FOR THE SECOND CIRCUIT

Docket No. 76-6087

JESSE B. STEPHENS, on behalf of himself and all other persons similarly situated,

Plaintiff-Appellant,

-against-

UNITED STATES OF AMERICA; UNITED STATES POSTAL SERVICE; E. THEODORE KLASSEN, in his capacity as Post-master General of the United States; UNITED STATES CIVIL SERVICE COM-MISSION; ROBERT E. HAMPTON, in his capacity as Chairman of the United States Civil Service Commission; and ELMER B. STAATS, in his capacity as Comptroller General of the United States,

Defendants-Appellees.

ON APPEAL FROM THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

#### DEFENDANT'S EXHIBITS

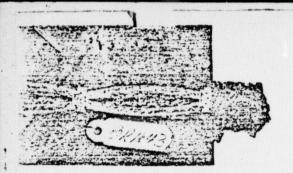
ROBERT B. FISKE, JR., United States Attorney For the Southern District of New York Attorney for the Defendants-Appellees One St. Andrews Plaza New York, New York 10007 (212) 791-1968 MICHAEL D. HAMPDEN Attorney for Plaintiff-Appellant The Legal Aid Society 1029 East 163rd Street Bronx, New York 10459 (212) 991-4600

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| (ED. 4-22-71)   |  |  | A55  |
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| U. S. DIST. COURT   |  |  |  |
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| FPI-M!2-2-73-10M-8753                                     | toral O. Fel   | 0 614477 :   | 49   |
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|   | 1 4  | 4 · ·  |  |
| DISTRIBUTION CYS.   | POST OFFICE DEPARTMENT   | OFFICE, GLASS AND REFERENCE  |  |
| CH. INSPECTOR   | BUREAU OF CHIEF  | Tew York, 5. Y. 100  | Ol First Class   |
| OP. HOQS.   | POSTAL INSPECTOR   | DATE   | CASE NO.   |
| GC. CL. DIV.  | EPORT OF POSTAL INSPECTOR:   | G. B. Foreter  | 43169-2  |
|   | BJECT CHOSTAL INSPECTOR:   | G. D. Idreter  | TYPE OF REPORT   |
|   | CISSEY NO. 614477  | MATTED: Jan. 21, 196   |  |
| TRANSP. DIV.  | f: J. Herbert Hell, Jwlra  | (Sta. E)   | SPECIAL  |
|   | D: Lerre Co.<br>DETS: Sapphire & Diemond   | AT: Sew York, N. Y. COMPL: Loga  | PRELIMINARY  |
| DATE INITIALS   | bracelet   | Charles Those  | FINAL  |
|   |  |  | SUPPLEMENTAL   |
| Postal Inspector's Cl                                     | W. W. W. Mann  |  |  |
| Tostal l'aspector in Charge,                              | Yew York, H. Y. 10001  |  |  |
|   | 70.00  |  |  |
| special delivery<br>Fadio City Stati<br>firm moved, and t | y developed that this article at the General Palon on January 25, 1966, for the piece was redispatched in all probability it was ary 26, 1966. | ost Office and then di<br>or regular delivery.<br>to the General Post (  | Expanded to Exercise the Effice as a bulk  |
| 4. Attacke referred to the property divisio               | ed are copies of correspon<br>New York Folice Departmen<br>on.   | dence showing that thi<br>t for the attention of   | La matter was<br>C their lost  |
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|   |  |  | BEST COPY AVAILABL   |

4316



Hew York, N. Y. 10001, June 8, 1966

Hr. Howard R. Leary Police Commissioner City of New York Hew York, N. Y. 10013

Dear Commissioner Leary:

The following described sapphire and diamond bracelet, valued at \$350.00, allegedly was lost while in the custody of the Postal Service:

18 carat yellow gold bracelet with six sections, each section having seven sapphires and three diemonds. Total weight of the sapphires, 4.50 carats and the weight of the dismonds 0.35 carats. The dismonds are set in white gold. A triangle is stamped on the bracelet clasp with an "L" within the triangle.

A photograph of a section of the bracelet is enclosed.

It would be appreciated if you would furnish the Property Recovery Squad with a description of this bracelet. In the event that it is located, I may be contacted by telephone at 971-7162. Correspondence may be addressed to me at New York, N. Y. 10001.

Very truly yours,

F. T. Quigley Postal Inspector

dm

Encl.

#### Date: Postal Inspector in Charge 6/4/69 NY NY 10001 Case No: 105205-SD. SENDER (Name and Address) ADDRESSEE (Name and Address) J. Herbert Hall, Jlrs., Larre Co., Pasadena, Calif. NY NY C.O.D. NUMBER To: INSURED NUMBER Postal Operations Div., San Francisco Region. REGISTERED NUMBER 614477 DATE MAILED 5/26/68 The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS. 7/8/66 4 12, 768,664 \$ 316,75 # 86905 PDC BUX 202940 FRC BOX accession 167-A-1159 6-14-68 (Inspector in Charge) tgf CERTIFICATION: . T. CLAIM CERTIFIED IN FAVOR OF ON (Date) CLAIM NO. 12-A-43169 FOR J. Herbert Hall, Jwlrs. \$ 316.75 June 16, 1968 Mailed to: PDC - San Franci CLAIM NOT RECEIVED. (DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIEFCA POSTAL INSPECTOR, FI DIVISION, WASHINGTON, D.C. 20260) DATE NAME (Signature) Fir Grganization & Stds Br Waller R. Reez W 1969 JUN 5 Howard Street POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Division, Washington, D. C. 20260 INSURED/COD - (From Form 3812) REGISTERED - (From Form 565) WAS ARTICLE COMMERCIALL VALUE (Item 6) WAS ARTICLE COMMERCIALL VALUE (Item 6) INSURED (Item 5) YES INSURED (Item 3) 315.00 PAYEE'S NAME & ADDRESS (Item 7) PAYEE'S NAME & ADDRESS (Item 7) J. Herbert Hall, Jewelers 725 E. Colorado Blvd Pasadena, Calif. 91101

To: Postal Inspector in Charge

NEW YORK, N. Y. 10001,

POSTAGE REFUND

(Item 33)

July 28, 1969

INFORMATION FURNISHED BY (Name and Title)

TOTAL AMOUNT (Item 41)

, 316.75

POSTAGE REFUND

Postal Data Center Post Office Department P. O. Box 3700 See Mateo. CA 94403

\$ 1.75

Chief Claims Examiner

AMOUNT TO BE

PAID (Item 32)

AMOUNT TO BE PAID (Item 39)

\$315.00

TOTAL AMT.

(Item 34)

| JSA 88+ - 475 *<br>ED. 4-28-71) |      | 2 Register No. 15265 A  |
|---------------------------------|------|---|
| " DEFENDANT'S                   | CYS. | POST OFFICE DEPARTMENT BUREAU OF CHIEF POSTAL INSPECTOR   |
| EXHIBIT<br>U. S. DIST. COURT    |      | TYPE OF REPORT OFFICE: CLASS: REFERENCES  NEW YORK, NEW YORK  New York County)  |
| S. D. OF N. Y.                  |      | SUBJECT  DATE August 19, 1968  CASE NO. 50298-A   |
| 2 8                             | 2    | Registry No. 15265 . Mailed on 6-2-67 By: Robert L. Davis, M.D. At: North Hollywood, ( To: Elgin Watch Co. At: New York, N.Y. |
| FPI-MI2-2-73-10M-8783           |      | Contents: one Elgin watch Complaint of Rifled  INDEMNITY REPORT   |
| AUG 2 3 1958                    | RIL  | Report of Postal Inspector T. W. McGrew   |

Postal Inspector in Charge,

New York, New York 10001

- 1. Personal attention was given this case at New York, N.Y. bh. various dates from July 29 through August 15, 1968. Babis for the case is Form 565, application for Indemnity for Registered Mail, dated June 19, 1967 and a report from James C. Smith, Los Angeles, California dated . October 3, 1967.
- 2. Mr. Bumford of Elgin Watch Company was interviewed relative to the receipt of this registered article. It was delivered to him in an official envelope #67. Registered Wall Damaged, Unsealed or Without Cover. Mr. Bumford acknowledged that the registered article was received without, contents. The carton was returned to the post office and has been retained with the case.
- 3. It has been determined that this register was received in good condition at the 36th Street Facility and subsequently rifled prior to delivery.
- 4. The contents of the registered article were described as "One Elgin watch-gold (not replaceable, a Railroad watch, used)". A letter received from Robert L. Davis, M.D., the claimant, stated that the inside of the watch was inscribed "14 K solid gold."
- 5. In an effort to determine the value of the contents, several stores which repair railroad watches were contacted in addition to Mr. Burford of the Mgin National Watch Company. It was determined that this watch in running condition would have a value not to exceed \$100 (if a purchaser could be located. There is no regular market in used railroad watches). When not in running condition, as this watch was, the value would be principally determined by the value of the gold in the case.

Case No. 50298-A

Results of the investigation indicated that a median value of \$75 should apply to this watch if in good condition. It is recommended that payment of this claim be made, the payment not to exceed \$100.

6. Further attention will be given this case.

Tw. Indeen

T. W. McGrew

Postal Inspector

Postal Inspector in Charge Case No: 105205-SD ADDRESSEE (Name and Address) SENDER (Name and Address) Elgin Watch Co. Robert I. Davis, M.D. New York, NY North Hollywood, CA C.O.D. NUMBER INSURED NUMBER To: Director, Postal Operations Division REGISTERED NUMBER San Francisco, CA. 94106 15265 DATE MAILED 6-2-68 The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS. CERTIFICATION: 1. CLAIM CERTIFIED IN FAVOR OF ON (Date) Sep 10, 1969 12-138 \$200.30 Robert L. Davis, M.D. CLAIM NOT RECEIVED. (DO NOT DJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIEF POSTAL INSPECTOR, FI DIVISION, WASHINGTON, D.C. 20260) night Organisation & Stds Br DATE SEP 1 0 1969 31 Howard Street POSTAL DATA CENTER - Please surnish information requested below and return completed som to: Chief Postal Inspector, FI Division, Washington, D. C. 20260 REGISTERED - (From Form 565) INSURED/COD - (From Form 3812) VALUE (Item 6) WAS ARTICLE COMMERCIALLY VALUE (Item 6) WAS ARTICLE COMMERCIALLY DE NO INSURED (Item 3) YES \$ 200.00 INSURED (Item 5) YES PAYES'S NAME & ADDRESS (Item 7) PAYEE'S NAME & ADDRESS (Item 7) Robert L. Davis 9418 VINELAND AVE NORTHHOLLYLVOOD PA TOTAL AMOUNT AMOUNT TO BE PAID (Item 39) POSTAGE REFUND POSTAGE REFUND TOTAL AMT. AMOUNT TO BE (Item 34)

PAID (Item 32)

AND A STANK OF STANK Postal Data Center

(liem 33)

Minneapolis, MN 55470

OCT 2 - 1969 INFORMATION FURNISHED BY (Name and Title)

DATE RAID

CLAURS EXAMINER

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To:

200.00

POST OFFICE DEPARTMENT DISTRIBUTION BUREAU OF CHIEF POSTAL INSPECTOR Chief Inspector TYPE OF REPORT OFFICE: CLASS; REFERENCES Operations, Hdqtrs. new york, new york Operations, PMs, POC & RA PRELIM. X FINAL (Hess Yerk County General Counsel, Claims 50298-A August 23, 1968 Money Order Division Regional Director SUBJECT Registry No. 15265 Madled on 6-2-67 By: Robert L. Davis, M.D. Ata North Hollyw To: Elgin Watch Co. Ats New York, N.: Contents: one Klein watch Complaint of Rif T. W. McGress Report of Postal Inspector

Postal Inspector in Charge,

New York, New York 10001

- 1. Personal attention was given this case on various dates from July 29 through August 20, 1968, at New York, N.Y. Basis for the case is Form 565, Application for Indemnity for Registered Mail, dated June 19, 1967 and a report from James C. Smith, Los Angeles, California dated October 3, 1967. A preliminary report covering the indemnity feature was made on August 19.
- 2. It has been determined that Register #15265 was signed out to the carrier for delivery at the 36th Street Facility on June 6, 1967. POD Form 3867 indicates that the carrier was cleared for Registered piece #15265 at 10:15 p.m. by Clerk Stevens. The piece in question was forwarded and Form 3849 indicating that the piece was forwarded and showing the forwarding address, 99 Park Avenue, was filed at Grand Central Station. To this point all indications are that the piece was in good condition.
- 3. Post effice envelope #87, used for registered mail damaged, unsealed or without cover, is endorsed to show that Register #15265 was discovered without contents, that the bex had been split. The witnesses on the envelope are Clerks Papa, Cliveto, and Foreman H. C. Nelson. The envelope was completed on June 6, 1967. The register was enclosed and forwarded to Murray Hill Station where delivery was effected. The package was delivered without contents to Mr. Bumford of the Eigin Watch Company and the wrapper recovered.
  - 5. No further attention is warranted at this time.

Postal Inspector

USA 33s - 475 (ED. 4-23-71)

DEFENDANT'S

**FXHIBIT** 

| U. S. DIST. COURT<br>S. D. OF N. Y. | Register # 192139 |   |
|-------------------------------------|-------------------|---|
| FPI-MI2-2-73-10M-8753               |                   |   |
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E94

| DEC                             | CA BENEVICE OF THE PERSON OF T | A.M. Rte.                                   | Lock No.      | Jacket No. | Received | Receiving Clerk Postmark of          | Receiping Office,  |
|---------------------------------|--|---|---------------|------------|----------|--------------------------------------|--|
| ISTERS                          | T. ANJOHAN ESTA  | OFFICE OF ORIGIN                            | AS            |            |          | 200 M. Postmark of Dispatching Glery | Referring Clerk C. 10-23894-11 : topo  |
| Jacket No. A.M. Rte.            | L 574.   | *Registration No. or<br>Jacket or Lock Nos. | AS TEN        | 65         | 6 01     |                                      | Relating Clerk he piece is dispatched loose in pouch and "O" if outside piece, and show destination. |
| Lock No. R 10364 Rotary No. 082 | CENTR.   | OFFICE OF ORIGIN                            | 336462XR DALK | R.17 10    | 1000     | articles My how                      | Spatch  Write "L" before the number if the piece is dispatched lose in p                             |
| Lock No. R. 10                  |  | *Registration No. or<br>Jacket or Lock Nos. | - 6           |            |          | al of sent by this dispatch          | 3852 "   |

UNITED STATES GOVERNMENT

### Memorandum · POST OFFICE DEPARTMEN A6

SUBJECT:

DATE: DEC. 5, 1967

FROM:

TO:

GRAND CENTRAL REGISTRY SECTION

IN REPLY REFER TO:

P. (

MR. GEORGE LAWRENCE OPERATIONS MANAGER GRAND CENTRAL STATION

DEAR SIR;

ON SATURDAY DECEMBER 2, 1967 &T ABOUT 2:30 P.M. I OPENED TWO POUCHES FROM 36th STREET FACILITY.

REGISTRY LOCK NUMBERS R 10361-082, AND M 86983-235 ON OPENING THEM
I DISCOVERED AN ENVELOPE LOOSE IN THE MAIL, ADDRESSED TO
LOUIS FRANKLIN 665 FIFTH AVENUE CONTAINING GOLD CUFF LINKS.
I REPORTED THIS TO MY SUPERVISOR.

I THEN PLACED THEM IN MY CASH BOX FOR SAFEKEEPING OVER THE WEEKEND, AS INSTRUCTED TO DO SO BY MY SUPERVISOR,

SINCERELY YOURS

POD Form 31 Mar. 1959

|             |                           | U    |  |                      | 03.4  | HY         |  |
|-------------|---------------------------|------|--|----------------------|---|------------|--|
| onig.<br>To | DISTRIBUTION              | CYS. | POST OFFICE DEPARTMENT BUREAU OF CHIEF POSTAL INSPECTOR        |                      |   |            |  |
|             | Chief Inspector           |      |  | FICE CLASS REFERENCE |   |            |  |
|             | Operations, Hdqtrs.       |      |  | na iuka, na          | IORE  | 4          |  |
|             | Operations, PMs, POC & RA |      | PRELIM. FINAL  | (Hess York Cour      | sty)  |            |  |
|             | General Counsel, Claims   |      | DA   | TE Dacember 17, 1    | OKRCASEINGENI.  |            |  |
|             | Money Order Division      |      | SPECIAL SUPPLE-  | wedgestage 113 1     | 300 B005-A  |            |  |
|             | Regional Director         |      | Begistry No. 19 By: Argo & Lehn To: Louis Frank Contents: Mane | din CoInc.           | Mailed on 11-30-<br>At: Columbus, On<br>At: New York, M.<br>Complaint of:<br>Missing contes | nio<br>.I. |  |
| DATE        | INITIAL                   | .5   | Report of Postal Inspector                                     | T. R. Der            | 1ek   |            |  |

J OFFICE 1967 - 280-370

Postal Inspector in Charge,

Hear York, New York 10001

- 1. This case was given personal attention at New York, N.T. on several dates between Cetober 10 and December 12, 1968 and at Columbus, Onio by Inspector J. C. Resse through I case procedure. Basis for the investigation is completed Form 565 relative to the above.
- 2. The subject register was dispatched from Columbus AFF under control #0118k labeled to AFF J.F. Kennedy at 11 p.m. Hovember 30, 1967 by Clerk E. L. Bankes via United Flight #8k7. The dispatch consisted of five listed articles and five bulk. The subject register was listed.
- 3. The article was received at J.F. Kennedy on December 1, 1967 at 1500 hours and signed for by Clerk 3. I. Wilkens. A search of the registry records at GPO and Grand Central Station disclosed no records for receipt or delivery of this register. Contact with the superintendent, AMF J. F. Kennedy disclosed no record for dispatch of this register to GPO New York, N.I. In all probability the article was bulk billed from AMF J. F. Kennedy to New York, N.I. The receiving clerk Wilkens would not have handled its oward dispatch into the city. There are normally a number of clerks handling city distribution at AMF J. F. Kennedy and there is no way to place individual responsibility.
- h. Mr. J. Fink, who handles claims for registered articles at Grand Central Station, recalled that a pair of jade cufflinks were found loose in a pouch that was sent from the 36th Street Facility to Grand Central Station. He could not recall the exact date the cufflinks were found. This is a pouch sent daily from the 36th Street Facility containing registers on which notices have been left for patrons to call at Grand Central Station. The cufflinks were in an exvelope addressed to Louis Franklin Company and were delivered by Mr. Fink when found loose in the smil. The addressee contacted the sender and was advised that the shipment also contained seven pair of 18 karat diamond earolips.

- 5. The Form 565 with the case file shows the declared value of the subject register as 31,000, whereas the actual value is 33,150. Investigation at Columbus, Ohio, by Inspector Reese disclosed that registered sail prepared for sailing by the sender is normally handled by a Mrs. Martin. A review of their procedures showed the various sales departments do not always furnish her the full value of the articles sailed. She arbitrarily designates the particular amount and with respect to this register, since she was aware the commercial insurance covered \$2,150, designated a \$1,000 value. Mr. Richard Argo advised that in the future full value would be declared on registered sail.
- 6. It is felt the subject register was rifled while in postal custody, at an undetermined point between ANF J.F. Kernedy and the 36th Street Facility. Since the register was probably bulk hilled from AMF J.F. Kernedy to GPO, New York, N.Y., there is no way to affix individual responsibility, as the registered article lost its identity.
- 7. It is recommended the claim in the amount of 31,000 be certified for payment subject to subrogation with the commercial insurer of the sender. It is also recommended that copies of this report be furnished the inspectors doing depredation work at AFF J.F. Kennedy, GPO, and the 36th Street Facility.

T. R. Zurick
T. R. Barick
Postal Inspector

|            |                           | $\simeq$ |  |  |                                |
|------------|---------------------------|----------|--|--|--------------------------------|
| ٠ <u>٠</u> | DISTRIBUTION              | CAS.     | BUI  | POST OFFICE DEPARTMEN  |                                |
|            | Chief Inspector           |          |  | OFFICE CLASS, REFERENCES   | - COIOR                        |
|            | Operations, Hdqtrs.       |          |  | HEM YORK, HEM YORK   | <b>\</b>                       |
| 1          | Operations, PMs. POC & RA |          | PRELIM. FINAL                                | (New York County)  | ì                              |
|            | General Counsel, Claims   |          |  | at the same of the | Trace wo                       |
|            | Money Order Division      | 1        | SPECIAL SUPPLE-                              | November 20, 1968  | ESCOL-A                        |
|            | Regional Director         |          | SUBJECT                                      |  | <del>- ;</del>                 |
|            |                           |          | Rifling of E<br>Lehne, Colum<br>Hew York, U. | egister \$192139 mili<br>bus, Onio, to Louis<br>Y., on 11-30-67.   | led by Argo &<br>Frenklin Co., |
|            | File                      |          | REQ  | WEST FOR ASSISTANCE  |                                |
| DATE       | INITIALS                  |          | Report of Postal Inspec                      | tor T. R. Zarick   |                                |

Postal Inspector in Charge,

dincinnati, Ohio 45201

- 1. This case was given personal attention at New York, N.Y. on several dates between October 10 and November 18, 1968. Busis for the investigation is completed Forms 565 relative to the above.
- 2. A check of the registry records at General Post Office and Grand Central Station, New York, H.I. post office, disclosed no records for receipt or delivery of this register. Nr. J. Fink, who bandles claims for registered articles, recalls that a pair of calf links were found loose in a pouch that was sent from the 36th Street Facility to Grand Central Station. An envelope with the cuff links determined that they were being sent to Louis Franklin Company, 665 Fifth Avenue, New York, H.I. Hr. Fink delivered the cuff links to the addresses firm and they contexted the sender, Argo & Lehne of Ch M. High Street, Columns, Ohio. They were advised that the shipment also had contained seven pair of 18 karet dissend ear clips valued at \$3150.
- 3. Enclosed is a copy of a letter dated July 6, 1968 to the Inspector in Charge, New York, N.Y. advising that they had been notified by postel officials that the registered package had been discovered behind some mail bags in one of the New York City post offices. They had been advised the package had been torn open and all the dissend earrings had been removed, and a pair of jade cuff links had been overlocked.
- 4. It is requested that an inspector assigned to the Columbus, Onle area determine the following:
  - a) The disputch particulars relative to this register end advise whether the office of sailing holds a clear receipt from the New York Mivision, if so, it is requested a copy of this receipt be furnished.

A7

- b) Interview the sender to see who informed him of the information contained in his letter to the Inspector in Charge, New York, N.Y. dated July 6, 1968, and to ascertain why the value declared at the time of milling was only \$1,000. Whereas the actual value of the shipment is \$3150.
- 5. The inspector's report will reach me at Room 5013, GPO, New York, N.J. 10001.

1. R. Jurick T. E. Dirick Postal Inspector

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ent Inspector in Charge New York, H.Y. 10301

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|----------|---|------|----------------------------|----------------------------------|---|--|--|--|
| c•:6     | DISTRIBUTION  | C45. | BURE                       | BUREAU OF CHIEF POSTAL INSPECTOR |   |  |  |  |
|          | Chief Inspector Operations, Hdqtrs. Operations, PMs, POC & RA |      | PRELIM. FINAL              | Columbus, Ohio                   | (let Cl.)   |  |  |  |
| $\vdash$ | General Counsel, Claims  Money Order Division                 |      | SPECIAL SUPPLE-            | December 5, 1968                 | 3 45604-XA  |  |  |  |
|          | Regional Director   |      | mailed by Argo             | & Lehne, Columbi                 | Register No. 192139<br>us, Onio. to Louis<br>rt, on 11-30-67. |  |  |  |
| DATE     | INITIALS  |      | Report of Postal Inspector | J. C. B                          | eese (y)  |  |  |  |

Postal Inspector in the American

T. R. Zarrick, Ra. 5013, GPO, New York, New York 10001

- 1. Reference is made to your preliminary report dated November 20, 1968 in the above numbered parent case and subject.
- 2. Inquiry at Columbus showed that Register No. 192139 was dispatched from Columbus ANF under Control No. 01184 labeled to Kennedy ANF. Such dispatch consisted of 5 listed articles and 5 bulk, and was made at 11:00 p.m. on November 30, 1967, by Clerk N. L. Bankes, via United Flight 847. Receipt for this dispatch was received from Kennedy AMF showing date of receipt as December 1, 1967 at 1500 hours, and signed by Clerk G. Y. Wilkens. Attached herewith are photocopius of POD Form 3830-A, covering the dispatch, and Part B of POD Form 3830 covering the receipt of the articles at Kennedy AMF by Clerk Wilkens.
- 3. Inquiry of Wr. Richard W. Argo, Argo & Lehne Jewelers, showed that they first learned about the alleged rifling of the article when they received telephone call from Louis Franklin Co., Inc., 665 Fifth Ave., New York, New York 10022, the addresses of the subject register. Mr. Argo stated that he understood someone in the New York post office had contacted Louis Franklin Company with respect to the rifling of the article, apparently when a pair of cuff links had been delivered to Louis Franklin Company. Allegedly any information pertaining to how and where the article had been rifled was furnished Argo & Lehne by Louis Franklin Company and not by anyone in either the New York post office or the Columbus, Chio post office. Review of Mr. Argo's letter in the file does not state that he received such information from any post office.
- 4. Information developed at Argo & Lehne showed that all articles mailed by this firm are prepared for mailing by two of their employees and that one employee in particular, a Mrs. Martin, usually prepares all mailing records. A review of their procedures showed that the various sales departments in the store did not always furnish information showing the full value of such

45G04-XA

with respect to this register, Mrs. Martin was sware that they carry commercial insurance which covers all above \$1,000.00, so she automatically showed a declared value of \$1,000.00 for coverage by the Post Office Department. At that time, she apparently had not been furnished the information showing the full value or contents of the article in question.

5. This procedure was reviewed with Mr. Richard W. Argo and Mrs. Martin, and Mr. Argo stated that he will change the procedure followed by the firm hereafter so that Mrs. Martin is given full information with respect to preparing articles for mailing by registered sail or insured mail. Mr. Argo advised that they have already received indemnity from their insurance corrier in the amount of \$2,150.00 and that their claim with the Post Office Department is only intended to be for the amount of \$1,000.00 not covered by their commercial insurance. Enclosed herewith is a brief note completed by Richard W. Argo stating that their claim for indemnity is only for \$1,000.00. Also herewith is a more clear copy of the firm mailing record pertaining to this particular register. You will note it is the first item shown on the list. Both Mr. Argo and Mrs. Martin advised that they will comply with the regulations regarding the declaration of full value of articles mailed hereafter even though they do not desire indemnity by the Government for such full amount.

J. C. Reese

Postal Inspector

|  | •  |                                      |                                  |                       | (  |              | ده ۲۵        |
|--|--|--------------------------------------|----------------------------------|-----------------------|--|--------------|--------------|
|  |  | POST OFFICE<br>Postal Inspe<br>NY NY | ctor in Charge                   |                       | Date:  | 6/4/6        |              |
| Argo & Lehne,<br>Columbus, O.                | dress)   |                                      |                                  | anklin                | d Address)<br>Co.                            |              |              |
| Г.,  | 2 0 - 11 Di-   |                                      | コ                                | ٤                     | C.O.D. NUMBER                                |              |              |
|  | l Operations Div<br>Innati Region.   | v.,                                  |                                  | T                     | NSURED NUMBER                                |              |              |
| 1  |  |                                      |                                  | T.                    | REGISTERED NUM                               | BER          | 192139       |
|  |  |                                      |                                  |                       | DATE MAILED                                  |              | 11/30/68     |
| and addressee as sh<br>Item 1 or 2. Then, s  | on Service is making a<br>lown. Please process<br>sign, date, and return<br>COMPLETED FORM | any claim you l                      | have pending<br>ly to me. Al     | on this a<br>OVISE ME | rticle and, as a <sub>l</sub><br>BY RETURN M | ppropriate   | , complete   |
|  |  |                                      |                                  |                       | (Inspecte                                    | -            | //tgf        |
| CERTIFICATION:                               |  |                                      |                                  |                       | 62112  | 2 - 2        | 24/67        |
| Argo and Lehne                               | N FAVOR OF   | \$ 759.03                            | ON (Date)                        |                       | 04231  |              |              |
| 2 CLAIM NOT REC                              | CEIVED. (DO NOT ADJUD  | ICATE ANY SUBSE                      |                                  | WITHOUT               |  | NDING WIT    | H THE CHIEF  |
| DATE   | NAME (Sig  | nature) +                            | 11 900                           |                       | TITLE  |              |              |
| June 6,1969                                  | Hunter   | A. race                              | C. fin                           | /CC                   | Postal Ope                                   | eration:     | s Services   |
| POSTAL DATA CENTE<br>Washington, D. C. 20260 | R - Please furnish informat<br>)   | ion requested below                  | and return com                   | pleted form           | to: Chief Postal In                          | ispector, FI | Division,    |
| INSURED/COD - (From                          |  | ALUE (Item 6)                        | REGISTERS                        |                       |  | Lyat         | UE (Item 6)  |
| WAS ARTICLE COMMER                           | YES NO \$  | ALUE (Item 6)                        | INSURED (Ite                     |                       | A YES   NO                                   |              | 000.00       |
| PAYEE'S NAME & ADDI                          | RESS (Item 7)  |                                      | PAYEE'S NA<br>ARGO B<br>NO NO ST | 11 1160               | EHIVE  |              |              |
| AMOUNT TO BE<br>PAID (Item 32)               | POSTAGE REFUND<br>(Item 33)  | TOTAL AMT.<br>(Item 34)              | AMOUNT TO<br>PAID (Item 3)       | BE                    | POSTAGE REFU                                 | IND T        | TOTAL AMOUNT |
| •  | <b>s</b>   | \$                                   | \$7501.0                         | 23                    | \$   |              | 751.03       |
|  |  |                                      |                                  | DATE                  | JUL  | 16 196       | 8            |

To:

Postal Inspector in Charge

NEW YORK, N. Y. 10001

B:4 No. .... A.M. Bie L. ck No. 1 , bet " 150'. THORICE OF SHEIR BECIZLEBS Jackel No. \*Reg. No. or Jacket or Lock Nos. Air Mail .... Train ..... Botary No. 556 (P. O. or R. P. O. and Tr. No.) \*\*OFFICE OF ORICIN POSTANSTER, Page No. 78/2/187 ! total of .... in this dispatch 1 1 . 15 1 - Dec. 1916

| DISTRIBUTION   | Crea<br>tro | POST OFFICE DEPARTMENT BUREAU OF CHIEF POSTAL INSPECTOR  |  |  |
|--|-------------|--|--|--|
| Chief Inspector Operations, Hegtra.                                    |             | TYPE OF REPORT OFFICE CLASS: REFERENCES.   |  |  |
| Operations, PMs, POC & RA General Counsel, Claims Money Order Division | $\perp$     | PRELIM. PINAL DATE DATE Cotcoor 18, 1968 CASE NO. SPECIAL MENTAL                                       |  |  |
| Ragional Director  |             | Efforts to determine whether official seals on Register #765446-1 were affixed in the Boston Mivision. |  |  |
|  |             | Boston Mvisica.  |  |  |
| File   |             | Boston Mvision.  RECUEST FOR ASSISTANCE  |  |  |

Postal Inspector in Charge,

Boston, Hassachusetts 02107

- 1. Begister 5769bb6-I was originally dispatched from Grand Central Station, New York, N.I. to Besten, Massachusette en June 21, 1968. It was refused at Boston by the addresses, Mr. Ammell B. Steuras, for return to the sender. A copy of a letter from the addresses to the mailer, Tiffany & Company, advises that the subject register was refused and returned to the postern unopened.
  - 2. On June 24, 1968 this register was returned to New York, H.I. via Nos 2 NI Train 29 in peach 85460, retary \$93. Norm 3652 shows the subject register was one of five listed pieces received, along with 28 bulk hilled articles by Registry Clerk Lena Hohren at 1705 a.m. on June 25, 1968. There is no record of bad condition on the 670 Registry Section "point" sheet. The disputching clerk, Laurence Breacher, noted no invegularities regarding the subject register. However, when it was received at the 36th Street Sacility, sessoting between 6 and 6:30 s.m. June 25, 1968, spening clerk anthony P. Cliveto reported the register was received with the bottom three sides alit and the register apparently exply.
  - 3. Examination of the rifled wrapper disclosed two official scals which were officed and imitialed (either JK or JK). Herks Molros and Breecher and Olivete were interviewed and affidavite obtained from each. Clerks No level and Breecher, of the GFO Registry Sertion, both state the article was in good condition when dispatched to the join Street Facility. However, neither am recall whether official scals were on the subject register when they handled it. Both clerks stated they did not affire the scals and both adviced that only supervisors have access to official scals. Herk Olivete stated the official scale were on the subject register when a noted the bad condition.

A7

- i. Although the Boston Division holds a clear receipt for this register it is felt there is some possibility the official scale may have been affixed in Boston since there appears to be some similarity between the embracements on the official scale and the embracing clerk's initial to the right of the "Return to Writer" storp. It is requested that an inspector sheek to see if there is any connection between the two embracements.
- 5. The improver's report, along with the enclosed wrapper and the copy of the letter from the addressee to the mailer, should be sent to me at floor 5013, 670, New York, N.Y. 1000%.

T. R. Zurick

T. R. Zurick

Postal Inspector

| C%4. | · DISTRIBUTION .   |      | BUREAU OF CHIEF POSTAL INSPECTOR   |                  |       |  |
|------|--|------|--|------------------|-------|--|
|      | Chief Inspector Operations, Bdetrs. Operations, PMs, FOC & Re General Counsel, Claims Money Order Division Regional Director | A    | TYPE OF REPORT OFFICE SUCCESSION OF THE SUCCESSI | CASE NO.         | Claud |  |
| DATE | INIT   | IALS | Report of Postal Inspector   | J. E. Bremmaruhl | 64    |  |

Postal Inspector in Charge

T. C. Zwrick, New York, How York 10001

- 1. This case received personal attention at Ecaton, MA on various debug beginning on October 25, 1908 and ending on November 13, 1968. Attention is based on your request for assistance concerning the above subject.
- 2. Discussion was held with all supervisors and employees who handled or had access to registered article \$70944-X while this parcel was in the austroit of the post office at Boston, MA. These employees are Stanley Tencey and Joseph Percell, supervisors, Registry Section, 670; Frank Bradley, Bill Bayes, Robert Greensald, Robert Sullivan, employees, Registry Section, 670; Jock Crasph, window clark, Registry Section; Reysond Loudress, Ambrew J. Telese, registry clarks, Carrier Section, 670, Soston, and Mr. Anthony Toung, carrier sho delivered the parcel and returned it when delivery was refused.
- I. Through discussion with all of these employees it was determined that Er. Jack Creech, whose proper mase is John W. Creech, is the employee who stemped the "return to sender" impressions on this parcel and endorsed them with the initial "J". However, Mr. Creech stated that he did not place the official scale on the parcel and stated the bendwriting on those seeds is not his.
- 4. Interview was held with Mr. Creach on Bovember 13, 1960, and he offered an efficient, which is herewith. In the body of his efficient Mr. Creach gave several specimens of his handwriting of the initials JC. These were not given expert analysis, but certain points of disciplinarity between Mr. Creach's initials and the headwriting on the official scale were noted. These were primarily the lower loop of the letter J. which on the official scale is prectically non-existent

whereas in Mr. Creagh's headwriting these are very large and pronounced. The C in the initials on the seal has no top loop and a wide upward swing at the end of the letter. Mr. Creagh's initials have a pronounced top loop and a short stroke at the end of the letter.

- 5. It was determined that Mr. Creagh has been a postal employee for 25 years and has worked at the Bagistry Section for approximately 15 of those years. During that time no other registry losses have been about tributed to him or passed through him hands. He is married, has no children, and lives at 1391 Commonwealth Avenue, Aliston, MA. He has lived at that address, where he runts, for 19 years. He came a 1955 Falcon entomobile, which is completely paid for, and he has no outstanding obligations. Both he and his wife enjoy good health and have an active savings account. Both his credit rating and his dementic life are assemblants.
- 6. From the time time some were broken on the incoming register and until the seals were affixed on the outgoing register containing this parcel only those employees mentioned above had access to it. All of these employees deny placing the seals on this percel and there is no reason to doubt the existements sade by any of them. It is, therefore, concluded in amswering the question posed by your request for essistance that the official scale on register \$769446-X were not placed on that parcel in this liminion.

#### J. E BRENENSTUHL

J. E. Brauenstoll Pastal Despector

Tile A80

|             |                                     |               |  | H  |
|-------------|-------------------------------------|---------------|--|----|
| OHIG.<br>TO | DISTRIBUTION                        | CYS.          | POST OFFICE DEPARTMENT BUREAU OF CHIEF POSTAL INSPECTOR  | 11 |
|             | Chief Inspector Operations, Hdqtrs. |               | TYPE OF REPORT OFFICE: CLASS: REFERENCES   |    |
|             |                                     | $\neg$        |  |    |
|             | Operations, PMs, POC & RA           | $\neg + \neg$ | PRELIM. FINAL (Rese Tork County)   |    |
|             | General Counsel, Claims             |               |  |    |
|             | Money Order Division                |               | SPECIAL SUPPLE- MOVEMBER 20, 1968 15492-A  |    |
|             | Regional Director                   |               | SUBJECT  |    |
| DATE        | File                                |               | Degistry No. 769hh6-I Mailed on 6-21-68 By: Tiffany & Co. At: New York, W.I To: Hr. Hussell B. Stearns Contents: ?? Complaint of Possible rifling. |    |
| DATE        | INITIALS                            |               | Report of Postal Inspector 7. 2. Zurick  |    |

Postal Inspector in Charge,

How York, New York 10001

- 1. This case was given personal attention at New York, N.Y. on several dates between August 19 and November 18, 1968 and at Boston, Massachusetts through I case procedure and reported by Inspector J. E. Bremenstahl on November 13, 1968. Basis for the investigation is a complaint made by the New York, H.Y. Registry Division (with wrapper) on June 28, 1968, relative to the above. Also with the case file is a Form 565 completed by the sender and by the Registry Section, Boston, Massachusetts, to show the article was refused by the addressee on June 2h, 1968 and returned to the sender.
- 2. The subject register was returned to New York, N.Y. via Bos & NY Tr. 27 in pouch 2-5160 rotary 93, an June 21, 1968. The register was one of five listed pieces along with 28 bulk billed articles received by Registry Tark Lens McCres at 1:05 a.m. on June 25, 1968. The register was dispatched to the 36th Street Facility by GRO Registry Tark Lawrence Breecher and received sometime between 6 and 6:30 a.m. the same day by the opening clark Anthony P. Olivete of the 36th Street Facility. When he examined the article Clark Oliveto noticed the bettem three sides were alit and the register apparently empty. He immediately reported this to Essistant Superintendent Lille. This fact was confirmed by Mr. Lille. There is no record of bad condition at GRO, New York, N.Y.
- 3. Examination of the rifled wrapper disclosed two official scale which were affixed and initialed either JK, JR, or JC. Clerks McGrea, Breecher and Clivato were interviewed and affidavits obtained from each. Clerks McGrea and Breecher advised that as far as they could recall the article was in good condition when received at GPO and when dispatched to the 36th Street Facility. Emither could recall whether the official scale were on the register at the time they handled it. Clerk Clivato stated the register

Jase No. 15192-A

was in the condition in which he reported and the seals were on the subject register when he noticed the bad condition. All three demied removing the contents of the subject register and a check of each personnel folder disclosed no derogatory information.

- h. Although the Boston Division holds a clear receipt for this register, there appeared to be some similarity between the initials on the official seals and the initial to the right of the "Return to Writer" stamp on the wrapper. Investigation at Boston by Inspector J. 3. Bremenstahl disclosed that the employee who affixed the "Return to Writer" stamp was John W. Creagh. An affidavit was obtained from Hr. Creagh and he offered various specimens of his handwriting for comparison. In his affidavit Mr. Creagh demisd reserving the contents of the register and affixing the seals. Certain points of dis-similarity were noted and it was concluded that the initials on the official seals were not Mr. Creagh's.
- 5. In addition to Mr. Creagh at least ten other employees had access to the register while it was in the custody of the post office, Boston, Passachusetts. They were all'interviewed and denied placing the seals on the register and no evidence could be obtained to doubt their word. In his report it was the conclusion of Inspector Bremenstuhl that the official scale were not placed on the register in the Doston Mivision.
- 6. In view of the above, it is falt the register was rifled while in the custody of the Postal Service at an undetermined point. Since there is no way to affix individual responsibility in this case, it is recommended that the post office absorb the loss and the claim in the amount of 18,000 be curtified in favor of the sender subject to subrogation with their commercial insurer.
- 7. It is recommended also that a copy of this report be furnished the depredation inspectors at GPO and the joth Street Radility.

T. E. Parick
Postal Inspector

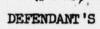
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|---|--|--|--|---------------|---|---------------------|
|   | ·  | POST OFFICE                                  |  | ENT           |   |                     |
| NY NY I                                       |  |  | ctor in Charge   |               | Date:                                   | 6/4/69              |
|   |  | NI NI  | 10001  |               | Case No:                                | 105205-£            |
| SENDER (Name and Ad                           | ddress)                                    |  | ADDRESS  | EE (Name a    | nd Address)                             |                     |
| Tiffany & C                                   | 0.,  |  |  |               | . Stearns,                              |                     |
| NY NY   |  |  | Bo   | ston, M       | ass.                                    |                     |
|   |  |  | The state of the s |               |   |                     |
|   |  |  |  |               |   |                     |
|   |  |  | 7  |               | C.O.D. NUMBER                           |                     |
| To: Pos                                       | tal Operation                              |  |  | l l           | INSURED NUMBER                          |                     |
|   | New Yor                                    | k Region.                                    |  | L             |   |                     |
|   |  |  |  | '             | REGISTERED NUMBE                        |                     |
|   |  |  |  | <b>-</b>      |   | 769446              |
|   |  |  |  |               | DATE MAILED                             | 6/21/68             |
| · m · D · 1.1                                 |  |  |  |               |   |                     |
| and addresses as sh                           | on Service is mak                          | ing an investigation<br>cess any claim you h | with regard  | to the arti   | cle described abo                       | ove with sender     |
| Item 1 or 2. Then.                            | sign, date, and ret                        | turn this form prompt                        | ly to me. Al   | DVISE ME      | RY RETURN MA                            | II IF THERE IS      |
|   |  | RM CANNOT BE RE                              |  |               |   |                     |
|   |  |  |  |               | 11.                                     | 2                   |
|   |  |  |  |               | D+1/-/                                  | D 13-               |
|   |  |  |  |               | (N) # 9                                 | tickly              |
|   | )  |  |  |               | (bispector in                           | Charge) tgf         |
| CERTIFICATION                                 |  | _  |  |               | 92615                                   | -5/2/19             |
| 1. CLAIM CERTIFIED I                          | N FAVOR OF                                 | FOR /  | ON (Date)  |               | CLAIM NO.                               | , , , , ,           |
| Federal Ins. Co                               | o. 90 John St                              | NYC \$888.00                                 | April  | 15. 1969      | 02-167                                  |                     |
| 2. CLAIM NOT REC                              | CEIVED. (DO NOT AL<br>CTOR, FI DIVISION, W | DJUDICATE ANY SUBSE<br>VASHINGTON, D.C. 2026 | QUENT CLAIM  | WITHOUT       | FIRST CORRESPOND                        | ING WITH THE CHIEF  |
| DATE  |  | (Signature)                                  | ^  |               | TITLE                                   |                     |
| - (   | - /  | 1  | () R   |               |   |                     |
| June 6, 196                                   |  | umony  | y. U   | 10380         | 1                                       | ations Examiner     |
| POSTAL DATA CENTER<br>Washington, D. C. 20260 | R - Please furnish info                    | ormation requested below                     | hand return com  | pleted join t | to: Chief Postal Insp                   | ector, FI Division, |
| INSURED/COD - (From                           |  |  | REGISTER   | ED - (From )  | Form 565)                               |                     |
| WAS ARTICLE COMMER<br>INSURED (Item 5)        | CIALLY<br>YES NO                           | VALUE (Item 6)                               | WAS ARTICL   | E COMMER      | CIALLY                                  | VALUE (Item 6)      |
|   |  | ] \$   |  |               | YES NO                                  | \$888.00            |
| PAYEE'S NAME & ADD                            | RESS (Item 7)                              |  | PAYEE'S NA   |               | THACE CO.                               |                     |
|   |  |  | 10 30114   | STREE         | 7                                       |                     |
|   |  |  | N.Y. N   | 1.7. 10       | 2038                                    |                     |
| AMOUNT TO BE<br>PAID (Item 32)                | POSTAGE REFUND<br>(Item 33)                | TOTAL AMT. (Item 34)                         | AMOUNT TO<br>PAID (Item 3)   | BE            | POSTAGE REFUND                          | TOTAL AMOUNT        |
| \$  | \$   | •  | \$858.0  | 242           | s :                                     | *888.00             |
|   |  |  | J  |               | UL. 16 1969                             | 1 339.00            |
|   |  |  |  |               | 1 |                     |
|   |  |  |  |               | TION FURNISHED B                        | , ,                 |
| To: Postal                                    | Inspector in Charg                         |  |  | 8             | LD mas                                  | ldin                |
|   | N YORK, N. Y. 19                           | 001.   |  |               | <b>OLAIMS EXAM</b>                      | NAER                |
| HEV   | A Annual in the                            |  |  |               |   |                     |

| A complete at a  |   |  |                   |                      | U. DR  |
|--|---|--|-------------------|----------------------|--|
| AI   | POST OFFICE<br>PPLICATION FOR INDEMN                    | DEPARTMENT<br>ITY FOR REGI                             | STERED SAIL       |                      | (3) HO   |
| L'oslumsier-Complete form and send                         |   | kspector (*<br>K, M. Y. 10001                          |                   | 21p Code) - 4        | 5492-A   |
|  | LARATION OF SENDER                                      |  | 1. CASE           | NO.                  |  |
|  | emplete items 2 through 10                              |  |                   | 7.54                 | 72 - A   |
| 2. NEASON FOR CLAIM (Check one)                            |   | AMAGE PA   | RTIAL DAMAGE      | NO COD R             | EMITTANCE .  |
| 3. WAS ARTICLE COMMERCIALLY                                | INSURED EITHER BY YOU OF A                              |  |                   | the nume and add     |  |
| Tyes   No Min  | Insurance to him Specific 100.                          |  |                   |                      | 3776   |
| 4. YOUR NAME AND ADDRESS (Shou                             |   | ss which was place                                     | d on the article) |                      |  |
|  | .57 St5th   |  |                   |                      |  |
|  | New York, N. 3  |  |                   |                      |  |
| 5. NAME AND ADDRESS OF ADDRES                              |   |  |                   |                      |  |
|  | 2011 P. C. P. C.    | R. B. Stearn<br>Tederal St.                            |                   |                      |  |
|  |   | ton, Mass.   |                   |                      |  |
| 6. LIST BELOW ARTICLES WHICH W                             | ERE LOST, MISSING, OR DAMAG                             | ED (Give value, co                                     |                   | etc. If claim is for | damage, describe   |
| COMPLETE DESCRIPT  | ION MUST BE FURNISHED                                   |  | a11)              | •                    |  |
| flatinen 4   | diamond clip  | moch   |                   |                      |  |
| 2 4  | ,1207   |  |                   |                      | פיו היית נ   |
| 1.   |   |  |                   | - 14                 | 10.0°  |
| 7. THE CHECK FOR MONEY PAID O                              |   |  | · ·               | 1 TOTAL A            | HOURT CLAIME   |
| PAYABLE TO (Nema)  | Federal Insu  |  | Ch.               | - 1 0                | 1. C.  |
| AND SENT TO (Address) (Include Zip Code)                   | go John Skuff   | - N.Y  | C. 10030          | 1 300                | 11. Y-1  |
| 9. DATE 9/13/60  | 10. SIGNATURE O   | 1:1  | Lecius.           | + 75                 | in. Del  |
| POSTMASTER-MAILING O<br>(Complete Items 11 through         | FFICE   | datanina montano mentala anguna di mentera di apunto d | New York,         | (Chy, State and 2    | (Ip Chife)   |
| 12. REGISTERED NO. 769446                                  | C.O.D. 13. WHERE MAILED (Me                             |  | . DATE MAILED     | (Month, day, year,   | hour)  |
| NO. 707440   | Grand Central Office Stati                              |  | June 21,196       | 5 <b>8</b>           | ·  |
| 45. DECLARED VALUE 16. POST PAID                           | AGE 16. a. FEEPAID 17. SURG                             |  | RICTED?           | . AIRMAIL 2          | O. SPEC.DEL.FEE  |
| : 65000 - 15.8   | 04 :3,00 \$111  | 77777  |                   | YES NO S             | HU   |
| POSTAL PARCEL  | -16-68 POIC NV  | 23. SIGNATURE OF                                       | F POSTMASTER      | THE BEST CHOSE       | <b>D</b> .   |
| POSTMASTER-OFFICE OF                                       |   | 1)/ 12   | 45 Posé bárice    | Charlest Dates       | and the same of th |
| (Complete items 24 through                                 | th 28)  |  | EOSTON, MA        | SS. 02109            |  |
| 25. DO YOUR RECORDS SHOW RECE<br>TO WHOM DELIVERED AND DAT | EINT OF THIS ARTICLE? IF YES<br>TE REFUSE D BY A DDRES  | STATE CONDITION  | ON, 25. a. II     | C.O.D., show M.C     | ), and Date  |
|  | NED TO SENDER 6/24                                      |  |                   |                      |  |
| 26. DATE OF FIRST COMPLAINT                                | 27. SIGNATURE OF POSTMAST                               | ER   |                   | E SIGNED             |  |
| 5/21/68  | Ephraim Martin, Postma                                  | MC.  | 00                | T 28 1968            |  |
|  | ARATION OF ADDRESSEE                                    |  | 29. DA            | TE                   |  |
| (Co<br>30, WAS THE ARTICLE RECEIVED I                      | mplete items 29 through 32) BY YOU? IF "YES," LIST THOS | E ITEMS WHICH WE                                       | ERE MISSING AND   | OOR DAMAGED          |  |
| YES NO   |   | •  | 0                 |                      |  |
| 31. SIGNATURE OF ADDRESSEE                                 | •   | 32. SIGNATURE  | AND ADDRESS OF    | OWNER (If not se     | rister or addressee)   |
| ·  |   | Oliver   | 1 West            |                      |  |
|  |   | Ker.   | ( ) Company       |                      |  |

| R .   | C ! REGION                      | AND ADJUSTING      | EXCHANGI   | i       | (S             |           |  |
|---|---------------------------------|--------------------|------------|---------|----------------|-----------|--|
| į   |                                 | CERTIFICATION      | 18 6/ 2    | 61      |                | _ **, . * | 7 A8   |
|   | NATIVE OFFICER                  | •                  |            | BY      | POSTAL DATA    |           | . 110  |
| 33. CERTIFYING OFFICE                             | •••••••••••                     |                    | 44. T/P(1) | 45. VE  | NDOR NUMBER (  | 1-6)      | 46.  |
|   |                                 |                    | M          |         | 1.5            |           | 36 5 30  |
| 34. PAYEE'S NAME (16-40)                          | Rev Year.                       | n " 1003           | -          | L       | <u> </u>       |           | L  |
| N. 2  |                                 |                    |            |         |                |           |  |
| Federal Insurance                                 | Co.                             | <del></del>        | 1 /        | 1       | A VINDE NAME . |           |  |
|   |                                 |                    |            | J= P    | AYEE'S NAME /  | ADD ADDR  | RESS   |
| 90 John Street, N                                 |                                 | 10038              |            |         |                |           |  |
| 36. INSTRUCTIONS HAVE BEEN ISSU                   | JED TO (Check one)              |                    | 1          |         |                |           |  |
| PACKAGE TO CLAIMANT                               | OF PACKAGE                      | E AS U.S. PROPERTY | r          |         |                |           |  |
| 37.   | 38. CERTIFYING OF NUMBER (41-49 |                    | 1          | 1       |                |           |  |
| ADDRESSEE'S<br>SIGNATURE WAIVED                   | U 74                            | -168               | <          | Z CI    | ERTIFYING OF   | FICE NUM  | BER  |
|   | 1                               |                    |            | •       |                |           |  |
|   |                                 |                    | 47. TYPE ( | OF      | 48. CATEGORY   | 49. FEE E |  |
| <del></del>                                       |                                 |                    | Loss (s    | 50)     | (51)           | (52-53    | )  |
|   |                                 |                    | 1          |         |                |           |  |
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|   | Ann street a few l              |                    | 1          |         | BER (56-70)    |           |  |
|   |                                 |                    | 9          | 8119    |                |           |  |
| 17. AMOUNT TO BE PAIL 40. POST.                   |                                 | OTAL AMOUNT        |            | 1       |                |           |  |
| 238.00  | 88                              | 00.8               |            | E AN    | MOUNT OF PAY   | MENT      |  |
| 42. NAME OF CERTIFYING OFFICIA                    |                                 |                    | 51. EXAMI  | NED BY  | (Initials)     | -,        |  |
| W. A. Carroll, Direc                              |                                 |                    |            |         | (              |           |  |
| 42. SIGNATURE OF AUTHOLIZED OF                    | FFICIAL II                      | DATE               | 1          |         |                |           | •  |
| - 1 6 4   |                                 | PR 15 1969         |            |         |                |           |  |
| John J. Day                                       | Con.                            |                    |            |         |                |           | and the state of t |
| .2  | ADDITIONAL                      | INFORMATION        | (Item 6 Co | ontinue | d)             |           |  |
| Mary James  |                                 | •                  |            |         |                |           |  |
| V. A. Junell, Directs<br>Fostel Operations Direct | or <sup>*</sup>                 | JUL 16             | 1989 /:    | 20.7    |                |           |  |
| -1-01 C. 0 . C. 13 1) 2. 9 2 C                    | u cử                            | JUL I              | 1          |         |                |           |  |

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**EXHIBIT** U. S. DIST. COURT

| 5. b. of N. y.        | Register #6487 |
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|-------------|---------------------------|------|---|----------------------|------------------|--|--|
| OPIG.<br>TO | DISTRIBUTION              | CYS. | POST OFFICE DEPARTMENT BUREAU OF CHIEF POSTAL INSPECTOR |                      |                  |  |  |
|             | Chief Inspector           |      | TYPE OF REPORT OFFIC                                    | E: CLASS; REFERENCES |                  |  |  |
|             | Operations, Hdqtrs.       |      |   | New York, N. Y.      |                  |  |  |
|             | Operations, PMs, POC & RA |      | PRELIM. FINAL   |                      |                  |  |  |
|             | General Counsel, Claims   |      | DATE  | April 4, 1969        | 45779-A          |  |  |
|             | Money Order Division      |      | SPECIAL SUPPLE-   | MPELL 4, 1909        | 77113-35         |  |  |
|             | Regional Director         |      | SUBJECT   |                      |                  |  |  |
| V           | POS.OP.ORG. & STAN. Phila |      | Registry No.: 64  | 87 Mailed            | on: 9-24-68      |  |  |
|             | Phila his                 | 1,,, | By: T& W Settin   | g Co. At: U          | nion, New Jersey |  |  |
|             | Plula Mi                  | 10   | To: Reinbro Corp  |                      | ew York, N. Y.   |  |  |
|             |                           | 1    | (Rheimhold E  |                      | int of: Rifling  |  |  |
|             | Jones                     | (12  | Contents: 41 rin  | gs                   |                  |  |  |
|             | File /                    | 1    |   |                      |                  |  |  |
| DAT         | PR 1 0 1969               |      | Report of Postal Inspector                              | C. M. Ha             | rm, Jr.          |  |  |

Postal Inspector in Charge,

New York, N.Y. 10001

- 1. Personal attention was given this case at New York, N.Y. on various dates concluding April 3, 1969. Besis for the investigation is a Form 565 relative to the above.
- 2. Investigation has disclosed that register No. 6487 was received in the GPO Registry Section on September 24, 1968. It was dispatched to the 36th Street Pscility, at 6:00 A.M., on September 25, 1968. There is no indication on Form 3854 to show that this register was in a damaged condition. The subject register was signed for by Registry Clerk Simmons, at 8:20 A.M., on September 25, 1968. It was charged out to Wagon 5, however, it was not taken out for delivery. Instead, it was marked as being in bad condition by Registry Clerk Oliveto.
- 3. The following named employees were on duty in the Registry Section at 36th Street Facility on September 25, 1968: Press, Mendelson, Oliveto, Simmons, Stephens, Beck and Weitman.
- 4. A visit was made to Reinbro Corp., and Miss Ostrov, of the claims department, was interviewed. She stated that the parcel had been only partially rifled and that when delivered, the parcel still contained 51 rings. An inventory made at that time disclosed that 41 rings were missing. She estimated that the 92 rings were worth approximately \$11,000,00.
- 5. The wrapper was examined, and it showed that a tear approximately 3" long had been made in the side of the carton. This tear was covered with paper tape by Registry Clerk Oliveto.

Case No. 45779-A

- 6. Mr. Kessler, manager of T & W Setting Co., was contacted. When asked why this register, worth approximately \$11,000.00, was registered for \$2000.00, he stated that it was the company policy at that time for the shipping clerk to estimate the value of the registered article.
- 7. Since the true value of this register was not declared at the time of mailing, it is recommended that the claim be disallowed.
- 8. It is further recommended that a copy of this report be furnished the depredation Inspector covering the 36th Street Facility.
- 9. Further attention to this case is not deemed warranted.

C. M. Harm, Jr.

Postal Inspector

Cm Glomp

yah

April 16, 1969

T. & W. Setting Company
P. O. Box 3
Union, New Jersey 07083

Gentlemen:

Reference is made to your claim for \$5,000 for loss of 41 rings contained in registered package No. 6487, addressed to The Reinbro Corporation, 277 Park Avenue, New York, N.Y. 10017. This package was mailed at Union New Jersey 07083, on September 24, 1968.

Our investigation disclosed that the actual value of the package was approximately \$11,000, but at the time of mailing a value of \$2,000 was declared.

According to Postal regulations, the actual value of a package must be declared at the time of mailing or the claim will be disallowed. Since the true value of this register was not disclosed at the time of mailing, we regret that no indemnity can be paid in this instance.

Sincerely, /s/ H. B. Hummel

H. B. Hummel, Director Postal Operations Division

## JST OFFICE DEPARTMENT

|                                |                             | Postal Inspe            | ctor in Charge           | Date: 8-11-  | -69 MO          |
|--------------------------------|-----------------------------|-------------------------|--------------------------|--|-----------------|
| •                              |                             |                         |                          | Case No: 10520   | 05-SD           |
| SENDER (Name and A             | ddress)                     |                         | ADDRESSEE (Nam           | 보호하다 하기 시장에 도로 전혀 있다. 보다 중에 보기 있었다. 중 원생님은 모든 경우를 되면 있는데 보다 하는데 없었다. |                 |
|                                | etting Co.                  |                         |                          | Corp. (Rheinhold Br  | ros.)           |
| Union, Ner                     |                             |                         | New York,                | 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                             |                 |
|                                |                             |                         |                          |  |                 |
|                                |                             |                         |                          |  |                 |
| <del>-</del>                   |                             |                         |                          | C.O.D. NUMBER  |                 |
|                                |                             |                         |                          | C.O.D. ROMBER  |                 |
| To:                            | ctor,                       |                         |                          | INSURED NUMBER   |                 |
|                                | al Operations Div           | rision                  |                          |  |                 |
|                                | adelphia, PA 191            |                         |                          | RECISTERED NUMBER  |                 |
| L                              |                             |                         |                          |  |                 |
|                                |                             |                         |                          | 9-24-68  |                 |
|                                |                             |                         |                          | L  |                 |
| The Postal Inspect             | ion Service is making       | an investigation        | with regard to the       | article described above v  | with send       |
| and addressee as s             | hown. Please process        | any claim you h         | ave pending on this      | s article and, as appropri   | iate, com       |
| Item 1 or 2. Then,             | sign, date, and return      | this form prompt        | ly to me. ADVISE         | ME BY RETURN MAIL I  | F THERI         |
| ANY REASON THE                 | COMPLETED FORM              | CANNOT BE RI            | ETURNED WITHIN           | 5 DAYS.  |                 |
|                                |                             |                         |                          | 201  | 7               |
|                                |                             |                         |                          | Or. Y.L  | otter           |
|                                |                             |                         |                          | Chief Inspe  | Seton           |
|                                |                             |                         |                          | director in dia  |                 |
| AFATIFICATION.                 |                             |                         |                          | 71-000   | 0/2.1.0         |
| CERTIFICATION:                 |                             |                         | ON (Date)                | 35002-   | 1-31/69         |
| 1. CLAIM CERTIFIED             |                             | FOR                     | 10/21/69                 | 03-674   |                 |
| Claim disail                   |                             | \$2,000                 |                          | UT FIRST CORRESPONDING   | WITH THE CHIEF  |
|                                | CTOR, FI DIVISION, WASH     |                         |                          | of Piksi Corresponding   | WITH THE CHIEF  |
| DATE                           | NAME (SIE                   | natura)                 | $\overline{}$            | TITLE  |                 |
|                                | m.x                         | Am                      | $\sim$ X                 | Deputy Regio   | nal             |
| Angust 14.                     | 1969 N. L.                  | Hummel                  |                          | Director, Op   | erations        |
| POSTAL DATA CENTE              |                             | ion requested below     | and return completed for | om to: Chief Postal Inspector  | r, FI Division, |
| INSURED/COD - (Fro             |                             |                         | REGISTERED - (F          | mm Form 565)   |                 |
| WAS ARTICLE COMME              |                             | ALUE (Item 6)           | WAS ARTICLE COM          | IERGIALLY  | VALUE (Item 6)  |
|                                | YES NO S                    |                         | INSURED (Item 3)         | (0)  | 5000.00         |
| PAYEE'S NAME & ADD             | RESS (Item 7)               |                         | PAYEE'S NAME A A         | DDRESS (Item 7)  |                 |
|                                |                             |                         | P.O. BOX 3               | ng co.   |                 |
|                                |                             |                         |                          | 0  |                 |
|                                |                             |                         |                          | 2.07083  |                 |
| AMOUNT TO BE<br>PAID (Item 32) | POSTAGE REFUND<br>(Item 33) | TOTAL AMT.<br>(Item 34) | AMOUNT TO BE             | POSTAGE REFUND   | (Item 41)       |
|                                |                             |                         | 12 000 00                |  | \$2 800 50      |
|                                | <u> </u>                    | L'                      | 2,000.00                 |  | *2,000.00       |
|                                |                             |                         | DATI                     | 0 400  | <b>-</b> 0      |

To:

Director, Rostakinspakter No.Chargek Postal Data Center Minneapolis, MN 55470

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CLAIMS EXAMILAR

This whole offers n - 68 , Dus mil 10h 27 No m

~ 11-24 - 68

BEST COPY AVAILABLE

UNITED STATES GOVERNMENT

# emorandum · POST OFFICE DEPARTMEN

SUBJECT:

FROM:

DATE:

Dec 17, 1968

IN REPLY REFER TO:

P. O. (

Registry Division Grand Central Sta New York N Y 10017

Missing Registered Article

YOUR REFERENCE:

To Inspector G B Forster General Post Office New York N Y 10001

Dear Sir:

#550191

Registered article #550191 mailed by Ellard Heffern, 407 No 8th St Louis Mo. 63101, on November 26, 1968, to McTeigue & Co., 16 East 53rd St, New York N Y 10022, containing one Diamond and Emerald platinum ring, valued at \$4375 has been lost by 36th Street Facility.

Article was listed on carrier charge sheet, (form 3867 for the 1 PM trip on Wednesday, November 27th, 1968. It was not taken out for delivery but returned by carrier B. Rubin, route 27 No. marked next trip at 1 PM. (The next day was a Holiday-- no scheduled trip.)

Article does not appear again . There is no record of delivery and addressee has denied receipt.

Photocopy and description of lost ring enclosed.

Lawrence, Oper Mgr

12/8/18 Celled hilly to get access on now 27, 28, 29 on Reg.

#### POST OFFICE DEPARTMENT Postal Inspector in Charge

Date:

6/4/69

NY NY 10001

Case No:

105205-5D

SENDER (Name and Address)

Elleard B. Heffern St. Louis, Mo.

ADDRESSEE (Name and Address)

McTeigue & Co., MY MY

Postal Operations Div., MXXXX St. Louis, Mo.

INSURED NUMBER

REGISTERED NUMBER

550191

DATE MAILED

11/26/68

The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS.

Returned herewith are papers rec'd. from you today. Also enclosed is copy of report sent to you 6/6/69. You had been sent the 50% before that report reached ou. When you certify claim, pls. complete & return

(Inspector in Charge) tgf

CERTIFICATION:

1. CLAIM CERTIFIED IN FAVOR OF

ON (Date)

CLAIM NO.

Elleard B. Heffern, Inc.

\$ 1,000

7-29-69

CLAIM NOT RECEIVED. (DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIEF POSTAL INSPECTOR, FI DIVISION, WASHINGTON, D.C. 20260)

DATE

NAME (Signature)

TITL F

7-29-69

Phlu Heidbreder

Director, Postal On POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Division, Washington, D. C. 20260

INSURED/COD - (From Form 3812) WAS ARTICLE COMMERCIALLY
INSURED (Item 5) YES

VALUE (Item 6)

REGISTERED - (From Form 565) WAS ARTICLE COMMERCIALLY INSURED (Item 3) YES

VALUE (Item 6) \$ 4375.00

PAYEE'S NAME & ADDRESS (Item 7)

FLOGARD B. HEFFERN 407 N 80 ST

Mo, 63/01

AMOUNT TO BE PAID (Item 39) TOTAL AMT.

TOTAL AMOUNT

1000.00

\$1000.00

DATE PAID

INFORMATION FURNISHED BY (Name and Title)

AUG 15 1969

To:

AMOUNT TO BE

PAID (Item 32)

Postal Inspector in Charge

NEW YCRK, N. Y. 1900]

POSTAGE REFUND

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|---|--|--|---|
|   |  |  | 179   |
| Postal Inspe  | ector in Charge  | Date: 6  | /4/69   |
| NY N  | 4 TOOOT  |  | 05205-SD  |
|   | ADDRESSEE (Nam   |  |   |
|   |  | onfeld, Inc.,  |   |
|   | NY NY  |  |   |
|   |  |  |   |
|   | -1   | COOR WINNER  |   |
|   | 1  |  |   |
|   |  | INSURED NUMBER   |   |
| Jembirra reserva-   |  | REGISTERED NUMBER  |   |
|   |  |  | 2580  |
|   |  | DATE MAILED  | 12/5/68   |
|   |  | <u> </u>   |   |
| e is making an investigation                                  | n with regard to the   | article described abov   | e with sender   |
|   |  |  |   |
|   |  |  |   |
|   | <i>(</i> -   | 00 0   |   |
|   |  | A X A  | You.  |
|   |  | 1.11   | ckly  |
|   |  | (Inspector in C  | Charge) tgf   |
|   |  | 93225  | -7/1/64   |
| of FOR  | ON (Date)  | CLAIM NO.  | 13-541  |
|   |  | · · · · · · · · · · · · · · · · · · ·  | 0541  |
| DO NOT ADJUDICATE ANY SUBSI<br>DIVISION, WASHINGTON, D.C. 202 | EQUENT CLAIM WITHO<br>260)   | UT FIRST CORRESPONDE   | NG WITH THE CRIEF   |
| NAME (Signature)  |  | TITLE  | * 1   |
| Humiling  | m  |  |   |
|   |  | THE RESERVE OF THE RE |   |
| furnish information requested below                           | w and return completed for   | om to: Chief Postal Inspe  | ctor, FI Division,  |
| 2)  | REGISTERED - (F  | rom Form 565)  |   |
| VALUE (Item 6)  | WAS ARTICLE COM-   | WERCIALLY NO   | VALUE (Item 6)  |
| 7)  | PAYEE'S NAME & A   | DDRESS (Item 7)  | \$ 700.00   |
|   | BEST TELLEL  | cy co.   |   |
|   |  |  |   |
| E REFUND TOTAL AMT.   | AMOUNT TO BE   | POSTAGE REFUND   | TOTAL AMOUNT  |
| (Item 34)   | PAID (Item 39)   | (Item 40)  | (Item 41)   |
| •   | : 700.00   | \$ .60   | \$700.60  |
|   | DATI   | E IIII 1 C WAD   |   |
|   |  | 10F TO 13093   |   |
|   | INFO   | RMATION FURNISHED BY   | (Name and Title)  |
| - i- Chara  |  | ilmien   | 1.tem   |
|   |  |  |   |
| W N Y 10001   |  |  | \$ \$4.00 t   |
| 7. 15. 1. 130 - Th  |  |  |   |
|   | Postal Insp.  NY N  Ations Div.,  Memphis Region.  The is making an investigation ease process any claim you e, and return this form promported by the state of t | Jack Fels NY NY  stions Div., Memphis Region.  The is making an investigation with regard to the ease process any claim you have pending on this, and return this form promptly to me. ADVISE ETED FORM CANNOT BE RETURNED WITHIN  DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUTSION, WASHINGTON, D.C. 20260)  NAME (Signature)  TH. C. Wilson, Jr.  Surnish information requested below and return completed for the information requested below and return comp | Postal Inspector in Charge NY NY 10001  Case No: 1  ADDRESSEE (Name and Address)  Jack Felsonfeld, Inc., NY NY  C.O.D. NUMBER  INSURED NUMBER |

|   |   |                              |                |             | $\longrightarrow$           | HY                                      |
|---|---|------------------------------|----------------|-------------|-----------------------------|---|
|   | , - ·   | POST OFFICE<br>Postal Inspec |                | NT          | Date:                       |   |
|   |   |                              | 10001          |             | 6/                          | 4/69                                    |
| r   |   |                              | 1              | (N          |                             | )5205-SD                                |
| SENDER (Name and Add                          |   |                              | 11             | EE (Name an |                             |   |
| Best Jewelry                                  |   |                              | NY NY          |             | Celd, Inc.,                 |   |
| Florence, Ala                                 | L•  |                              | WI PA          |             |                             |   |
|   |   |                              |                |             |                             |   |
|   |   |                              |                | Ţ.          |                             |   |
|   |   |                              |                | l'°         | .O.D. NUMBER                |   |
| To: Post                                      | tal Operations Di                               |                              |                | 1           | NSURED NUMBER               |   |
|   | Memphis R                                       | egion.                       |                | L           |                             |   |
|   |   |                              | 1              |             | REGISTERED NUMBER           | 2580                                    |
| <u> </u>                                      |   |                              |                | -           | PATE MAILED                 |   |
|   |   |                              |                |             |                             | 12/5/68                                 |
|   |   |                              |                |             |                             |   |
| The Postal Inspection                         | on Service is making a                          | n investigation              | with regard    | to the arti | cle described above         | e with sender                           |
| and addressee as sh                           | own. Please process                             | any claim you h              | ave pending    | on this ar  | ticle and, as appro         | priate, complete                        |
|   | sign, date, and return the COMPLETED FORM C     |                              |                |             |                             | THERE IS                                |
| ANY REASON THE                                | COMPLETED FORM C                                | ANNOI BE RE                  | TOWNED W       | i i uiu 2 n | A15.                        |   |
|   |   |                              |                |             | 0(10)                       | <b>'</b>                                |
|   |   |                              |                | 7           | TXI ON                      | - bour                                  |
|   | ·,  |                              |                |             | 10/                         | and y                                   |
|   | 1   |                              |                | •           | (Inspector in C             | harge) / tgf                            |
| CERTIFICATION:                                |   |                              |                |             | 93225                       | -7/1/69                                 |
| Sender  | N FAVOR OF                                      | FOR 700 00                   | ON (Date)      | 1060        | CLAIM NO.                   | 13-541                                  |
|   | TO WOOD AND THE                                 | \$ 700.00                    | June 9,        |             |                             | 0541                                    |
|   | CEIVED. (DO NOT ADJUDIOTOR, FI DIVISION, WASHIN |                              |                | WITHOUT     | FIRST CORRESPONDIN          | IG WITH THE CHIEF                       |
| DATE  | NAME (Signa                                     | iture)                       |                |             | TITLE                       |   |
| June 9, 196                                   | 9   | Sully                        | ~              |             | Chief, Organ                |   |
|   | H. C. Wi  | Ison, Jr.                    |                |             | Standards                   | Branch                                  |
| POSTAL DATA CENTER<br>Washington, D. C. 20260 | R - Please furnish informatio<br>)              | on requested below           | and return com | pleted form | to: Chief Postal Inspec     | zor, FI Division,                       |
| INSURED/COD - (From                           |   |                              | REGISTER       | ED - (From  | Form 565)                   |   |
| WAS ARTICLE COMMERINSURED (Item 5)            | YES NO S  | LUE (Item 6)                 | WAS ARTICL     |             | YES NO                      | * 700,00                                |
| PAYEE'S NAME & ADDR                           |   |                              | PAYEE'S NA     | ME & ADDR   | ESS (Item 7)                | , |
|   |   |                              | BEST JA        | werry       | eo.                         |   |
|   |   |                              |                |             |                             |   |
|   |   |                              |                |             | 35630                       |   |
| PAID (Item 32)                                | POSTAGE REFUND<br>(Item 33)                     | (Item 34)                    | PAID (Item 3   |             | POSTAGE REFUND<br>(Item 40) | (Item 41)                               |
| 5   | 8   | \$                           | : 700. e       | 00          | \$ .60                      | \$700.60                                |
|   |   |                              |                | DATE        | JUL 16 1969 3               | r .47                                   |
|   |   |                              |                |             | 20F TO 1909 3               |   |
|   |   |                              |                | INFORMA     | TION FURNISHED BY           | (Name and Title)                        |
|   |   |                              | •              |             | Thomas                      | 11.                                     |
| To: Postal                                    | Inspector in Charge                             |                              |                | 1           | CHAIRED TYPE                | illina.                                 |
|   | v 1000  | 11.                          |                |             | OLAIMS EXAM                 |   |
| 11  | EVI YORK, N. Y. 1000                            | *                            |                |             |                             |   |
| L.  |   | •                            | 1              |             |                             |   |

| Al   | PPLICATIO                   | ON FOR IN       | DEMNITY F  | OR REGISTE!                            |  |                 |              | HY      |
|--|-----------------------------|-----------------|--|--|--|-----------------|--------------|---------|
|  |                             |                 |  |  | y, Stetm and Zip   |                 |              |         |
| Postmaster-Complete form and send  |                             | -               | The state of the s | nattanonga,                            | Marriagement of the Parks of th |                 | •            |         |
|  | LARATION omplete items      |                 | R·   |  | 1. CASE NO   | 4737            | 3            |         |
| 2. RZASON FOR CLAD! (Check ora)  |                             |                 | •  |  |  |                 |              |         |
| LOSS CONTENTS  |                             |                 | ETE DAMAGE   |  | L DAMAGE   | NO COD R        |              |         |
| 3. WAS ARTICLE COMMERCIALLY  | INSURED EIT                 | THER BY YOU     |  | EE? (If yes, giv<br>surance company    |  |                 |              |         |
| 4. YOUR NAME AND ADDRESS (Shou   | ild be the same             | e as the return | n address whic   | h was placed on t                      | the articlo)   |                 | :            | 1200 mm |
| Best Jewelry Co. South Court St.   | artan                       |                 |  |  |  |                 |              |         |
| Florence, Alabama 5. NAME AND ADDRESS OF ADDRESS   | 35630                       | same as about   | the  |  |  |                 |              |         |
| Jack Felsonfeld Inc<br>665 5th Ave.<br>New York, N.Y. 100  | 022                         |                 |  |  |  |                 |              |         |
| 6. LIST BELOW ARTICLES WHICH W   | ERE LOST, N                 | JISSING, OR I   | DAMAGED (GIV   | e value, cost of di<br>king in detail) | fuplication, etc.  | L' claim is for | damage, de   |         |
| l - String of mate   | hed pearl                   | ls \$7          | 700.00   |  |  |                 |              |         |
|  |                             |                 |  |  |  |                 |              |         |
| 7. THE CHECK FOR MONEY PAID OF THIS CLAIM SHOULD BE MADE PAYABLE TO (Name)  AND SENT TO (Address)  AND SENT TO (Address)   | Ве                          | est Jewel       | lry Co.  | ama 35630                              |  | 8. TOTAL A      |              | AIMED   |
| 9. DATE  |                             | 10. SIGNAT      | URE OF SEND  | ER . //                                |  | 11 4            | 1/10         |         |
| POSTMASTER-MAILING O   | 2222                        | 135             | N/kwe  |  | 11/3   | War. L          | 1            |         |
| (Complete items 11 through   | gh 23)                      | ė               |  |  | est office (C:   | Alahama         | 25630        |         |
| NO. 2580  C.O.D. CHARGES \$  | ]c.o.p. 13. ¥               |                 | e, Alabam  | or Unit) 14. DAT                       | -5-68  | PM              | Dec. S       | 1948    |
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| 21. POSTAGE IF INTERNATIONAL 22  POSTAL PARCEL UNION POST  | 2-10-69                     |                 | AINT 23. SIGN  | NATURE OF PCY                          | al the is  | DATE SIGNE      |              | 91.9    |
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| (Complete items 24 through the complete items 24 through the compl | IPT OF THIS                 | ARTICLE?        | IP YES, STATE  | CONDITION,                             | 725. e. H C.O  |                 | D. and Date  |         |
| 26. Date of first complaint  | 1 Ju                        | M. C            | Chinas /   | 1.0                                    | 28. DATE 3   | ICNED           | 469          |         |
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POD Form 555

Pensities are provided for making false, fictitious, or fraudulent statements in connection with this type of claim.

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| . Defendant's  |  | E DEPARTMI   |  | Deter  | 11110 #   |
| EXHIBIT  |  | NY 10001   |  | Date:  | 6/4/69  |
| U. S. DIST. COURT  |  |  |  | Case No:   | 105205-SD   |
| S. D. OF N. Y.   |  |  | SEE (Name ar   | nd Address)  |   |
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|  |  |  | 6  | PATE MAILED  | 12/6/68   |
| The Postal Inspection Service and addressee as shown. Please item 1 or 2. Then, sign, date, and ANY REASON THE COMPLET   | se process any claim you<br>and return this form promp   | have pending<br>otly to me. Al   | on this ar   | ticle and, as ap   | propriate, complete   |
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| CERTIFICATION  |  |  |  |  | <i>U</i> **-  |
| CERTIFICATION  | FOR  | ON (Date)  |  | CLAIM NO.  |   |
| CLAIM CERTIFIED IN FAVOR OF  R.M. FitzSimmons  | \$158.00   | 7-8-69   |  | Strate Of  | 313   |
| CLAIM CERTIFIED IN FAVOR OF  R.M. FitzSimmons  | \$158.00   | 7-8-69<br>EQUENT CLAIM   | WITHOUT F  | Strate Of  | 313 DING WITH THE CHIEF   |
| R.M. FitzSimmons  2 CLAIM NOT RECEIVED. (DO  | \$158.00  NOT ADJUDICATE ANY SUBSISSION, WASHINGTON, D.C. 202  NAME (Signature)  | 7-8-69<br>EQUENT CLAIM   | WITHOUT F  | Strate Oli 3   | DING WITH THE CHIEF   |
| CLAIM CERTIFIED IN FAVOR OF  R.M. FitzSimmons  CLAIM NOT RECEIVED. (DO  DOSTAL INSPECTOR, FI DIVI  | *158.00  NOT ADJUDICATE ANY SUBSISSION, WAS HINGTON, D.C. 202  NAME (Signature)  C. G. HOAG  | 7-8-69<br>EQUENT CLAIM   | WITHOUT F  | Strate Oli 3   | 313 DING WITH THE CHIEF rations Services  |
| P.M. FitzSimmons  CLAIM NOT RECEIVED. (DO  POSTAL INSPECTOR, FI DIVI   | *158.00  NOT ADJUDICATE ANY SUBSISSION, WASHINGTON, D.C. 202  NAME (Signature)  L.B.Gard  L.B.Gard   | 7-8-69<br>EQUENT CLAIM   | WITHOUT F  | PLAN OLI<br>PRST CORRESPON   | rations Services  |
| CLAIM CERTIFIED IN FAVOR OF  R.M. FitzSimmons  CLAIM NOT RECEIVED. (DO  DOSTAL INSPECTOR, FI DIVI  | *158.00  NOT ADJUDICATE ANY SUBSISSION, WASHINGTON, D.C. 202  NAME (Signature)  L.B.Gard  L.B.Gard   | 7-8-69<br>EQUENT CLAIM   | WITHOUT F  | PLAN OLI<br>PRST CORRESPON   | rations Services  |
| July 14,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  Insured/Cod - (From Form 3812)   | *158.00  NOT ADJUDICATE ANY SUBS. ISION, WASHINGTON, D.C. 202  NAME (Signature)  L.B.Gard  L.B.Gard  Againsh information requested below   | 7-8-69<br>EQUENT CLAIM   | Manage   | Privilail Oper   | rations Services  |
| I. CLAIM CERTIFIED IN FAVOR OF  R.M. FitzSimmons  CLAIM NOT RECEIVED. (DO  DOSTAL INSPECTOR, FI DIVI  DATE  July 11,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260   | *158.00  NOT ADJUDICATE ANY SUBSISSION, WASHINGTON, D.C. 202  NAME (Signature)  L.B.Gard  Lib.Gard  No. 1000  L.B.Gard  VALUE (Item 6)   | 7-8-69 EQUENT CLAIM 60)  w and return comp   | Manage  Manage  pleted form to   | Privilail Oper   | rations Services spector, FI Division,  |
| July 14,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY   | *158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202  NAME (Signature)  L.B.Gard  L.B.Gard  Manual Companies of the property of the p | 7-8-69 EQUENT CLAIM (60)  and return comp  | Manage pleted form to  | Chief Postal Ins   | Pations Bervices  |
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| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI.  DATE  JULY 11, 1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)   | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  NO  VALUE (Item 6)  \$  REFUND  TOTAL AMT.  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLINSURED (Ite PAYEE'S NAI P. M. 2-2 AMOUNT TO   | Pleted form to   | Chief Postal Ins   | rations Bervices  spector, FI Division,  VALUE (Item 6)  § 300.00                                 |
| P. M. Fit. 2 Simmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11, 1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  POSTAGE R (Item 33)                                 | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  No. Signature)  L.B.Gard  VALUE (Item 6)  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | Manage  pleted form to  ED - (From F  E COMMERC  m 3)  ME & ADDRE  7  ALCOV  BE  | Chief Postal Ins  Com 565)  IALLY YES  ANO  ESS (Item 7)  CALLA  CALLA | rations Services  spector, FI Division,  VALUE (Item 6)  \$ 300.00                                |
| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI.  DATE  JULY 11, 1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)   | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  NO  VALUE (Item 6)  \$  REFUND  TOTAL AMT.  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLINSURED (Ite PAYEE'S NAI P. M. 2-2 AMOUNT TO   | Manage  pleted form to  ED - (From F  E COMMERC  m 3)  ME & ADDRE  7  ALCOV  BE  | Chief Postal Ins  Com 565)  IALLY YES NO  ESS (Item 7)  CILLUM  POSTAGE REFUN  | rations Services  spector, FI Division,  VALUE (Item 6)  \$ 300.00                                |
| P. M. Fit. 2 Simmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11, 1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  POSTAGE R (Item 33)                                 | \$158.00  NOT ADJUDICATE ANY SUBSISION, WASHINGTON, D.C. 202  NAME (Signature)  L.B. Gard  L.B. Gard  VALUE (Item 6)  TOTAL AMT. (Item 34)   | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | Manage  pleted form to  ED - (From F  E COMMERC  m 3)  ME & ADDRE  7  ALCOV  BE  | Chief Postal Ins  Com 565)  IALLY YES NO  ESS (Item 7)  CILLUM  POSTAGE REFUN  | rations Services  spector, FI Division,  VALUE (Item 6)  \$ 300.00                                |
| P. M. Fit. 2 Simmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11, 1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  POSTAGE R (Item 33)                                 | \$158.00  NOT ADJUDICATE ANY SUBSISION, WASHINGTON, D.C. 202  NAME (Signature)  L.B. Gard  L.B. Gard  VALUE (Item 6)  TOTAL AMT. (Item 34)   | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | pleted form to   | Chief Postal Ins  Chief Postal Ins  Chief Postal Ins  Com 565)  TALLY YES  A NO  ESS (Item 7)  CHIEF POSTAGE REFUN (Item 40)   | rations Services  pector, FI Division,  VALUE (Item 6)  \$ 300.00  TOTAL AMOUNT (Item 41)  \$ 158 |
| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  \$ \$   | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  VALUE (Item 6)  \$  REFUND  TOTAL AMT. (Item 34)  \$  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | pleted form to   | Chief Postal Ins  Chief Postal Ins  Chief Postal Ins  Com 565)  TALLY YES  A NO  ESS (Item 7)  CHIEF POSTAGE REFUN (Item 40)   | rations Services  spector, FI Division,  VALUE (Item 6)  \$ 300.00                                |
| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  AMOUNT TO BE PAID (Item 32)  S  To: Postal Inspector in | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  VALUE (Item 6)  \$  Charge  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | pleted form to   | Chief Postal Ins  Chief Postal Ins  Chief Postal Ins  Com 565)  TALLY YES  A NO  ESS (Item 7)  CHIEF POSTAGE REFUN (Item 40)   | rations Services  pector, FI Division,  VALUE (Item 6)  \$ 300.00  TOTAL AMOUNT (Item 41)  \$ 158 |
| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  AMOUNT TO BE PAID (Item 32)  S  To: Postal Inspector in | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  VALUE (Item 6)  \$  Charge  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | pleted form to   | Chief Postal Ins  Chief Postal Ins  Chief Postal Ins  Com 565)  TALLY YES  A NO  ESS (Item 7)  CHIEF POSTAGE REFUN (Item 40)   | rations Services  pector, FI Division,  VALUE (Item 6)  \$ 300.00  TOTAL AMOUNT (Item 41)  \$ 158 |
| P. M. FitzSimmons  CLAIM NOT RECEIVED. (DO POSTAL INSPECTOR, FI DIVI  DATE  JULY 11,1969  POSTAL DATA CENTER - Please furn Washington, D. C. 20260  INSURED/COD - (From Form 3812)  WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES  PAYEE'S NAME & ADDRESS (Item 7)  AMOUNT TO BE PAID (Item 32)  \$ \$   | \$158.00  NOT ADJUDICATE ANY SUBS. (SION, WASHINGTON, D.C. 202)  NAME (Signature)  L.B.Gard  L.B.Gard  VALUE (Item 6)  \$  Charge  | 7-8-69 EQUENT CLAIM (60)  REGISTERE WAS ARTICLI INSURED (Item PAYEE'S NAI PAYEE'S NAI CLAIM AMOUNT TO PAID (Item 39)   | pleted form to   | Chief Postal Ins  Chief Postal Ins  Chief Postal Ins  Com 565)  TALLY YES  A NO  ESS (Item 7)  CHIEF POSTAGE REFUN (Item 40)   | rations Services  pector, FI Division,  VALUE (Item 6)  \$ 300.00  TOTAL AMOUNT (Item 41)  \$ 158 |

#### POST OFFICE DEPARTMENT 6/4/69 Postal Inspector in Charge Date: NY NY 10001. 105205-SD Case No: SENDER (Name and Address) ADDRESSEE (Name and Address) Cartier, R. M. Fitzsimmons, NY NY Louisville, Ky. C.O.D. NUMBER INSURED NUMBER Fostal Operations Div., Cincinnati Region. REGISTERED NUMBER 50926 DATE MAILED 12/6/68 The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS. (Inspector in Charge) CERTIFICATION ON (Date) T. CLAIM CERTIFIED IN FAVOR OF CLAIM NO. \$158,00 7-8-69 8th 3th 04313 R.M.FitzSimmons CLAIM NOT RECEIVED. (DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIEF POSTAL INSPECTOR, FI DIVISION, WASHINGTON, D.C. 20260) Manager, Mail Operations Services R. B. Hona DATE L.B.Gard July 14.1969 POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Division, Washington, D. C. 20260 INSURED/COD - (From Form 3812) REGISTERED - (From Form 565) WAS ARTICLE COMMERCIALL VALUE (Item 6) VALUE (Item 6) INSURED (Item 3) 300.00 INSURED (Item 5) YES PAYEE'S NAME & ADDRESS (Item 7) OSTAGE REFUND AMOUNT TO BE PAID (Item 39) TOTAL AMOUNT (Item 41) AMOUNT TO BE POSTAGE REFUND TOTAL AMT. PAID (Item 32) (Item 33) (Item 34) 158.00 INFORMATION FURNISHED BY (Name and Title) Postal Inspector in Charge To: NEW YORK, N. Y. 19001

POD Form 555 Penalties are provided for making false, fictitious, or fraudulent

LITES

31. SIGNATURE OF ADDRESSEE

WAS THE ARTICLE PRESENTED BY YOU? IF "YES," LIST THOSE ITEMS WHICH WERE MISSING AND/OR DAMAGED

32. SIGNATURE AND ADDRESS OF OWNER (If not sender or addresses

| USA 33s - 475  | 1. Pe.  | edy:  | Togitat No  |
|--|---|---|---|
| (ED. 4-23-71)  DEFENDANT'S   | POST OFFICE Postal Inspect                    | DEPARTMENT<br>tor in Charge   | Date: 6/4/69  |
| EXHIBIT  | NY N  | N 10001   | Case No: 105205-5   |
| U. S. DIST. COURT  |   |   | ame and Address)  |
| S. D. OF N. Y.   |   | David V   | Webb, Inc.,   |
| 0.4  |   | NI NI   |   |
| 4 19.  |   | . –   | C.O.D. NUMBER   |
| 1  | Div.,   |   | INSURED NUMBER  |
|  | ion.  |   |   |
| FPI.MI2-2-73-10M-8753  |   |   | REGISTERED NUMBER 265751  |
|  |   | <del></del>   | DATE MAILED 1/16/69   |
|  |   |   | ne article described above with sender  |
| and addressee as shown. Please p Item 1 or 2. Then, sign, date, and ANY REASON THE COMPLETED  Lave Carlination | return this form prompt                       | ly to me. ADVIS   | this article and, as appropriate, complete SE ME BY RETURN MAIL IF THERE IS IN 5 DAYS.  (Inspector in Charge) |
| CERTIFICATION:   | <i>// / / / / / / / / / / / / / / / / / /</i> |   | 1   |
| T-CLAIM CERTIFIED IN FAVOR OF  | FOR 1/1248                                    | ON (Date)   | 69 CLAIM NO. 12-895   |
| POSTAL INSPECTOR, FI DIVISION  | N, WASHINGTON, D.C. 2026                      | (0)   | HOUT FIRST CORRESPONDING WITH THE CHIEF   |
| JUN,5 1369   | We (Signature) Walter                         | R. Rees W   | Chieft Organization & Stda Br<br>631 Howard Street<br>Sch Francisco, Calif. 94106                             |
| POSTAL DATA CENTER - Please furnish<br>Washington, D. C. 20260   | information requested below                   | and return complete   | ed form to: Chief Postal Inspector, FI Division,  |
| INSURED/COD - (From Form 3812)   |   | THE RESERVE AND ADDRESS OF THE PERSON NAMED IN COLUMN 2 IN COLUMN | - (From Form 565) OMMERGIALLY VALUE (Item 6)  |
| WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES NO   | VALUE (Item 6)                                | WAS ARTICLE CO  |   |
| PAYEE'S NAME & ADDRESS (Item 7)  | 1   | BEVERL  | MUSHIKE AL GOLD   |
| AMOUNT TO BE POSTAGE REP   | UND TOTAL AMT.                                | AMOUNT TO BE<br>PAID (Item 39)  |   |
| s s  | •   | \$ 100.0  | 0 : 2 - 102 43  |
|  |   | D   | ATE JATE AALD 7-18-69   |
|  |   | 7 1   | NFORMATION FORNISHED OF Name and Title)   |
| To: Postal Inspector in C  | harae   |   | Valananea   |
| To: Postal Inspector in C  | y, 10001                                      |   | Characteristics   |
| HEM YORK, B.   |   | o l   | A commend of the societies  |
|  |   | ا لــ   | . N   |

POST OFFICE DEPARTMENT Date: Postal Inspector in Charge 6/4/69 NY NY 10001 Case No: 105205-S ADDRESSEE (Name and Address) SENDER (Name and Address) David Webb, Inc., Mrs. Tom May. NY NY Beverly Hills, Calif. C.O.D. NUMBER To: INSURED NUMBER Postal Operations Div., San FranciscoxRegion. REGISTERED NUMBER 265751 DATE MAILED 1/16/69 The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS. (Inspector in Charge) ON (Date CLAIM NOT RECEIVED. (DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIEF NAME (Signature) Chieff Organization & Stds Br 631 Howard Street San Francisco, Calif. POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Division, Washington, D. C. 20260 INSURED/COD - (From Form 3812) REGISTERED - (From Form 565) VALUE (Item 6) VALUE (Item 6) WAS ARTICLE COMMERCIALLY WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES INSURED (Item 3) YES \$ 79,150,00 PAYEE'S NAME & ADDRESS (Item 7) PAYEE'S NAME & ADDRESS (Item 7) BEVERLY HILTON HOTEL MRS TOM 90210 BEVERL POSTAGE REFUND AMOUNT TO BE AMOUNT TO BE PAID (Item 32) POSTAGE REFUND TOTAL AMT. PAID (Item 39) (Item 34) (Item 33) \$ 100.00 Postal Inspector in Charge To: NEW YORK, N.Y. 10001

| 11 1-6   |
|--|
| POD Form 1510—Original—Part II Date 2-4-69                       |
| TOTAL MODERNING TOCK OF RIFILING OF MAIL PLATITUDE               |
| FFD . Positioned No. 265 131() Special Delivery                  |
| ( ) Letter 17 196 Gertified No( ) Special Handling               |
| Airmed   |
| 5XCX 12 (Class) (Insert "Unnumbered" if minimum feet)            |
|  |
| ( ) Ordinary C.O.D. No Amount due sender &                       |
| Complaint Date mailed (Y-) (Hr.) (Day of week)                   |
| 0 1000 00 902-10   |
| Mailed at :- City) (State) (ZIP Code)                            |
| Where dengated Main Office                                       |
| Where deposited  |
|  |
| Contents (describe fully) and value United # 100,00              |
| Sperin dumana (Fold hors)  |
| Sandar Addressee: 01 4 1   |
| Sender Tom MAY David Will  |
| (Name) 1 11 An or roaded   |
| Beverly Hiller Hold (St. or P.O. Box or Raral Royle Na.)         |
| (St. or P.O. Hox or Rural Route No.)                             |
| Kiverly Hills Ca New york Wit                                    |
| (City) (State) (ZIP Code) (City) () (State) (ZIP Code)           |
|  |
| POD Form 1510-Original-Part III                                  |
| POSTMASTER, OFFICE OF ADDRESS: Date                              |
| Please show disposition of the above-described articles          |
| Dale & Smell (214 Code)  |
| (Postmaster at mailing office) (ZIP Code)                        |
| REPLY:   |
| Deta 3/27 19 5 Has addressee received article? (Year at 20)      |
| 1                          |
| (If delivered, show date; if no record, so state NO RECORDS      |
| If delivered to firm, state accepting employees name             |
| If not intact, what was missing?                                 |
| If C.O.D., give money order No.                                  |
| If undelivered and on hand, state reason                         |
| If received but not delivered and not on hand, state disposition |
| 10./18/11  |
| (Postmaster at address office) (ZIP Code)                        |
| POD FORM 4 P 4 O   |
|  |

Mc Ricard of above

Bulk Billed all the way through

Private Insurance for Balance \$49,250.

P.O. Insural for \$100.00

| 3~   | <b>—</b>   |  |   |  |  |
|--|--|--|---|--|--|
| 1:475  |  |  | PLECATE.  |  | - A  |
| DEFENDANT'S EXHIBIT  |  | Postal Inspe   | DEPARTMENT octor in Charge  | Date: 7/28<br>Case No: 1052  | /69.   |
| U. S. DIST. COURT<br>S. D. OF N. Y.  |  |  | Maurice Ti<br>665 Fifth<br>New York,  | shman,   |  |
| 10 J.  | ions Divi  |  |   | C.O.D. NUMBER  | ·  |
| FP!-NI-2-2-73-10N-8753   |  | 55425  |   | REGISTERED NUMBER  | 94281  |
| <b>—</b>   |  |  | <b>心</b> (*) >  | DATE MAILED  | 2/13/69  |
| hasmuch as this loss<br>ase of the above nur   | ber, we are  | anxious to   | get the certi-  | 196 ()   | Hele   |
| ase of the above nuication particulars.  | ber, we are  | anxious to   | get the certi-  | (Inspector in Ch   | Hickel   |
| certification:   | ober, we are a Your cooper   | anxious to   | get the certi-  | (Inspector jn Ch   | Hickel   |
| certification:  CERTIFICATION:  J. B. Hudson Co  | VOR OF   | FOR \$ 500.30  | on (Date) 8-4-69  | (Inspector jn Ch   | 9-136  |
| CERTIFICATION:  CERTIFICATION:  CLAIM CERTIFIED IN FA  J. B. Hudson Co  CLAIM NOT RECEIV.  POSTAZ. INSPECTOR   | VOR OF  LED. (DO NOT ADJUD.  FI DIVISION, WASHI  | FOR<br>\$ 500.30<br>ICATE ANY SUBSINGTON, D.C. 202   | on (Date) 8-4-69  | CLAIM NO.  04329  OT FIRST CORRESPONDIN  | 9 – 1 3 6<br>g with the chie   |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CLAIM CERTIFIED IN FA  J. B. Hudson Co  CLAIM NOT RECEIVED TO POSTAL INSPECTOR  DATE  August 4, 1969  POSTAL DATA CENTER - P   | VOR OF  LED. (DO NOT ADJUD., FI DIVISION, WASHI  | FOR<br>\$ 500.30<br>SICATE ANY SUBSINGTON, D.C. 202  | on (Date) 8-4-69 EQUENT CLAIM WITHOU  | CLAIM NO.  04329  TITLE  Dir., Postal C  | 99-136<br>G WITH THE CHIE  |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  August 4, 1969  | VOR OF  LED. (DO NOT ADJUD.  FI DIVISION, WASHI  John C.  Rease furnish information 3812)  | FOR \$ 500.30 SINGTON, D.C. 202 Schufman ion requested below   | on (Date) 8-4-69 EQUENT CLAIM WITHOUT and return completed for  | CLAIM NO.  O4329  OT FIRST CORRESPONDIN  TITLE  Dir., Postal Community to: Chief Postal Inspect  | 9-136 G WITH THE CHIE  |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CLAIM CERTIFIED IN FA  J. B. Hudson Co  CLAIM NOT RECEIV.  POSTAZ INSPECTOR  DATE  August 4, 1969  POSTAL DATA CENTER - P Washington, D. C. 20260  | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  John C.  Rease furnish informati  m 3812)  LY  VA                           | FOR<br>\$ 500.30<br>SICATE ANY SUBSINGTON, D.C. 202  | on (Date) 8-4-69 EQUENT CLAIM WITHOUT 60)  and return completed for   | CLAIM NO.  O4329  OT FIRST CORRESPONDIN  TITLE  Dir., Postal Community to: Chief Postal Inspect  | OPERATIONS DEPARTMENT OF THE CHIE  |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CLAIM CERTIFIED IN FA  J. B. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER - P Washington, D. C. 20260  INSURED/COD - (From Forward Insured)  WAS ARTICLE COMMERCIAL   | VOR OF  DED. (DO NOT ADJUD. FI DIVISION, WASHI  John C.  Rease furnish informati  m 3812)  LY  NO  NO  NO  NO  NO  NO  NO  NO  NO  N | FOR \$ 500.30 SINGTON, D.C. 202 Schufman ion requested below   | ON (Date)  8-4-69  EQUENT CLAIM WITHOUT  OUT AND  | CLAIM NO.  04329  OT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  om Form 565)  BROINLLY YES DO  DORESS (Item 7)  NO CO. 8 th St.  | perations Dor, FI Division,  VALUE (Item 6)  2000.4  |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE                                      | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  VALUE (Sign  John C.  Rease furnish informati  m 3812)  LY  STAGE REFUND    | FOR \$ 500.30 SICATE ANY SUBSINGTON, D.C. 202 mature)  Schufman ion requested below                  | ON (Date)  8-4-69  EQUENT CLAIM WITHOUT  ON and return completed for  REGISTERED - (Fr.  WAS ARTICLE COMMINSURED (Item 3)  PAYEE'S NAME & AI  J. B. HUDSO  M. W. SAI  ATTAL HK  AMOUNT TO BE                          | CLAIM NO.  04329  OT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  om Form 565)  BROINLLY  YES DO  DORESS (Item 7)  NO CO. & C.                 | OPERATIONS  OPERATIONS  OPERATIONS  OF FI Division,  VALUE (Item 6)  * 2000-6  * NECE   IET   1/2  * TOTAL AMON  |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE                                      | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  NAME (Sign  John C.  Rease furnish informati  m 3812)  LY  NO  (Item 7)     | FOR \$ 500.30 SINGTON, D.C. 202 Schufman ion requested below   | ON (Date)  8-4-69  EQUENT CLAIM WITHOUT  ON and return completed for  REGISTERED - (Fr.  WAS ARTICLE COMM INSURED (Item 3)  PAYEE'S NAME & AI  J. B. HUDSO  MINUTED (Item 39)  ATTAL HE  AMOUNT TO BE  PAID (Item 39) | CLAIM NO.  (04329)  IT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  DOMESS (Item 7)  NCC. & th St.  POLIS, POSTAGE REFUND (Item 40)  \$ 30                                   | perations Dor, FI Division,  VALUE (Item 6)  * 2000.6  NICE   IET    TOTAL AMON (Item 41)  * 500.3   |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE                                      | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  VALUE (Sign  John C.  Rease furnish informati  m 3812)  LY  STAGE REFUND    | FOR \$ 500.30 SICATE ANY SUBSINGTON, D.C. 202 mature)  Schufman ion requested below                  | ON (Date)  8-4-69  EQUENT CLAIM WITHOUT  ON and return completed for  REGISTERED - (Fr.  WAS ARTICLE COMM INSURED (Item 3)  PAYEE'S NAME & AI  J. B. HUDSO  MINUTED (Item 39)  ATTAL HE  AMOUNT TO BE  PAID (Item 39) | CLAIM NO.  O4329  OT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  Om Form 565)  BROIALLY  VES NO  DORESS (Item 7)  NCC: Sth ST   | perations Dor, FI Division,  VALUE (Item 6)  * 2000. 6  NICE   IET    TOTAL AMON (Item 41)  * 500. 3   |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE                                      | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  VALUE (Sign  John C.  Rease furnish informati  m 3812)  LY  STAGE REFUND    | FOR \$ 500.30 SICATE ANY SUBSINGTON, D.C. 202 mature)  Schufman ion requested below                  | on (Date) 8-4-69 EQUENT CLAIM WITHOUT 60)  REGISTERED - (Fr WAS ARTICLE COMMINSURED (Item 3)  PAYEE'S NAME & AI J. B. HUDSO M. W. A. A. A. T. A. H. K. AMOUNT TO BE PAID (Item 39)  SOCCUE DATE                       | CLAIM NO.  (04329)  IT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  DOMESS (Item 7)  NCC. & th St.  POLIS, POSTAGE REFUND (Item 40)  \$ 30                                   | perations Dor, FI Division,  VALUE (Item 6)  * 2000. 6  NICE   IET    TOTAL AMON (Item 41)  * 500. 3   |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE PAID (Item 32)  S  S | VOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  VALUE (Sign  John C.  Rease furnish informati  m 3812)  LY  STAGE REFUND    | FOR \$ 500.30 SICATE ANY SUBSINGTON, D.C. 202 mature)  Schufman ion requested below                  | on (Date) 8-4-69 EQUENT CLAIM WITHOUT 60)  REGISTERED - (Fr WAS ARTICLE COMMINSURED (Item 3)  PAYEE'S NAME & AI J. B. HUDSO M. W. A. A. A. T. A. H. K. AMOUNT TO BE PAID (Item 39)  SOCCUE DATE                       | CLAIM NO.  (04329)  IT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  Om Form 565)  BROINLLY  VES NO  DORESS (Item 7)  NCC. & th ST +  POLIS, POSTAGE REFUND  (Item 40)  \$ 30 | perations Departions Departions Departions Departions Departions Department of the D |
| CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CERTIFICATION:  CALAIM CERTIFIED IN FA  J. R. Hudson Co  CLAIM NOT RECEIVED INSPECTOR  DATE  AUGUST 4, 1969  POSTAL DATA CENTER -P  Washington, D. C. 20260  INSURED/COD - (From Form WAS ARTICLE COMMERCIAL INSURED (Item 5)  PAYEE'S NAME & ADDRESS  AMOUNT TO BE PAID (Item 32)  S  S | NOR OF  VOR OF  DED. (DO NOT ADJUD.  FI DIVISION, WASHI  NAME (Sign  John C.  Rease furnish informati  m 3812)  LY  NO  (Item 7)     | FOR \$ 500.30  ICATE ANY SUBSINGTON, D.C. 202  nature)  Schufman  ion requested below  ALUE (Item 6) | on (Date) 8-4-69 EQUENT CLAIM WITHOUT 60)  REGISTERED - (Fr WAS ARTICLE COMMINSURED (Item 3)  PAYEE'S NAME & AI J. B. HUDSO M. W. A. A. A. T. A. H. K. AMOUNT TO BE PAID (Item 39)  SOCCUE DATE                       | CLAIM NO.  (04329)  IT FIRST CORRESPONDIN  TITLE  Dir., Postal Common to: Chief Postal Inspect  Om Form 565)  BROINLLY  VES NO  DORESS (Item 7)  NCC. & th ST +  POLIS, POSTAGE REFUND  (Item 40)  \$ 30 | perations Dor, FI Division,  VALUE (Item 6)  * 2000.6  NICE   IET    TOTAL AMON (Item 41)  * 500.3   |

### POST OFFICE DEPARTMENT

Postal Inspector in Charge

New York, N. Y., 10001

Date: 7/28/69.

Case No: 105205-SD

SENDER (Name and Address) J. B. Hudson Co., Minneapolis, Minn. ADDRESSEE (Name and Address) Maurice Tishman. 665 Fifth Avenue, New York, N. Y., 10022

To:

Postal Operations Division, Minneapolis Postal Region. 512 Nicollet Avenue, Minneapolis, Minn., 55425

C.O.D. NUMBER INSURED NUMBER REGISTERED NUMBER 94.281

DATE MAILED

2/13/69

(copy to Postal IinC, St. Paul, Minn., 55101)
The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS.

/Thasmuch as this loss is chargeable to a depredator in our case of the above number, we are anxious to get the certification particulars. Your cooperation would be appreciated (Inspector h Charge

CERTIFICATION:

CLAIM CERTIFIED IN FAVOR OF J. B. Hudson Co.

ON (Date)

8-4-69

CLAIM NO. (04329

09-136

\$ 500.30 CLAIM NOT RECEIVED. (DO NOT ADJUDICATE ANY SUBSEQUENT CLAIM WITHOUT FIRST CORRESPONDING WITH THE CHIE POSTAL INSPECTOR, FI DIVISION, WASHINGTON, D.C. 20260)

DATE

August 4, 1969

John C. Schufman

TITLE

Dir., Postal Operations Div

POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Division, Washington, D. C. 20260

INSURED/COD - (From Form 3812) WAS ARTICLE COMMERCIALLY INSURED (Item 5) YES VALUE (Item 6) □ NO

REGISTERED - (From Form 565) WAS ARTICLE COMMERCIALLY
INSURED (Item 3) YES

VALUE (Item 6) : 2000.00

PAYEE'S NAME & ADDRESS (Item 7)

J. B. HUDSONCO. 8th ST + NICE ILET MA

MINNEAPOLIS, MINN, THE'S ATTN. HR. R.H. JOHNSON

AMOUNT TO BE PAID (Item 32)

POSTAGE REFUND (Item 33)

TOTAL AMT. (Item 34)

AMOUNT TO BE PAID (Item 39)

POSTAGE REFUND (Item 40)

TOTAL AMOUNT (Item 41)

50000

· 500.30 \$ .30 DATE DATE PHID

INFORMATION FURNISHED BY Wante and Gale

To:

Postal Inspector in Charge

HEW YORK, M. Y. 10001

| POD Form 1510-Original-Pact II Date Mar 10, 1969   |
|--|
| 15/1/ INQUIRY FOR THE LOSS OR RIFLING OF MAIL MATTER   |
| Registered No. 94281 ( ) Special Delivery  |
| ( ) Lipsier  |
| (X) Parcel 1st Certified No. () Special Handling Insured No. (X) Airmail (Insured No. (Insured N |
|  |
| ( ) Ordinary C.O.D. No Amount due sender \$  |
| Complete Logs p  |
| Complaint Loss Date mailed Feb. 13, 1969 4:35PM Thu (Loss or riffing) (Ma.) (Date) (Tr.) (Mr.) (Day of week)   |
| Mailed at Minneapolis, Minnesota 55401   |
| (City) (State) (ZIP Code)  |
| Where deposited Loop Sta, 84 So 8th St. 1/pls, Minn 55402 (Main office, station, branch, or location of collection box)  |
| Contents (describe fully) and value One platinum ring with 6 diamond   |
| ,50/100 carat 175; one old cut diamond, approx 12 carat  |
| \$ 1,825 (Fold here)   |
| Sender: Addressee:   |
| J.B. Hudson Company Faurice Tishman (Name)   |
| 8th Street & Nicollet Mall 665-5th Avenue  |
| (St. or P.O. Box or Rural Route No.) (St. or P.O. Box or Rural Route No.)  |
| Minneapolis, Minn 55402 New York, New York 10022   |
| (City) (State) (ZIP Code) (City) (State) / G(ZIP Code)   |
|  |
| POD Form 1510—Original—Part III 9(176) (1) Post MASTER, OFFICE OF ADDRESS: Date APR 3 1969   |
| POSTMASTER, OFFICE OF ADDRESS: Date APR 3 1969   |
| Please show disposition of the above-described article HOGAN   |
| POST   |
| (Postmanter of mailtag attiget 1711 ginles   |
| REPLY:   |
| Date   |
| mediane de la constante de la RECORTI  |
| (If delivered, show date; if no record, so state; If delivered to firm, state accepting employee's name;   |
| If not intact, what was missing?   |
| If C.O.D., give money order No, date, 19)  |
| If undelivered and on hand, state reason   |
| If received but not delivered and not on hand, state disposition   |
|  |
| (Made her the  |
| ere ets-10-23385-20 (Pestmanter et address office) // (ZIP Code)   |
| POD FORM 4 F 4 O   |

| · Mineral  | 1                      | 116  | ·,e • •                                       |                                   | te nin   |
|--|------------------------|--|---|-----------------------------------|--|
| 32s - 475<br>4-23-71)  | POS                    | T'OFFICE I   | DEPARTMEN                                     | T Date:                           | 1 A A 10                                       |
| DEFENDANT 'S   |                        | NV NV  | 10001   | Case No:                          | 105205-SD                                      |
| EXHIBIT  |                        | NI NI  |   | (Name and Address)                | 20,202   |
| U. S. DIST. COURT  |                        |  |   |                                   |  |
| S. D. OF N. Y.   | Þ,                     |  |   | Modeshu,<br>h XXI, NYC NY<br>Ave. |  |
| 11 /1  |                        |  | · L   |                                   |  |
| 11 id.   |                        |  | 7   | C.O.D. NUMBER                     |  |
| //   | erations Div           |  |   | INSURED NUMBER                    |  |
| FPI-NI2-2-73-10H-8753  | adethura wel           | 310110   | 1   | REGISTERED NUM                    | ABER . 47 1120                                 |
| 1  |                        |  |   | DATE MAILED                       | 3/5/69   |
| CERTIFICATION: No reconstruction by the rectain certified in Fazer Ramball Jewelly | 89.                    | pt of the a Inspector of the Inspector o | his claim<br>ction Ser<br>on (Date)<br>7/8/69 | n. Information                    | ria Charge) tgf<br>n lurnished<br>s report due |
| 2. CLAIM NOT RECEIVED. (   | DO NOT ADJUDICAT       | E ANY SUBSE  | QUENT CLAIM                                   | WITHOUT FIRST CORRESPO            | ONDING WITH THE CHIEF                          |
| July 8, 1969   | N. L'. Hu              | du   | m   | Director                          | , Postal Opers                                 |
| POSTAL DATA CENTER - Please<br>Washington, D. C. 20260                             | furnish information re | quested below  | and return comp                               | leted form to: Chief Postal       | Inspector, FI Division,                        |
| INSURED/COD - (From Form 38)   |                        |  |   | (From Form 565)                   | 1  |
| WAS ARTICLE COMMERCIALLY USURED (Item 5) YES                                       | 4                      | (Item 6)<br>(P. DO   | NSURED (L)                                    | COMMERCIALLY NO                   | VALUE (Item 6)                                 |
| PAYEE'S NAME & ADDRESS (Item<br>RAMBALL JEWE<br>29 W. 4th ST.                      | RY STEEF               |  | PAYELS NAM                                    | AE & ADDRESS (1977) The           | ned  |
| AMOUNT TO BE POSTA (Item 32)   | GE REFUND TO           | TAL EMT.<br>m 34)  | AMOUNT TO<br>PAID (Item 39                    |                                   | UND TOTAL AMOUN                                |
| V.1000.00 :  | 10//                   | 000.00   | •/  |                                   |  |
|  |                        |  |   | DATE JUL                          | 2 9 1369                                       |
| To: Postal Inspecto  | r in Charge            |  | ٦   | LATITE AL ALERO                   |  |

116

#### POST OFFICE DEPARTMENT

Postal Inspector in Charge

Date:

6/4/69

|   | NY NY 10001  | Case No:                      | 105205-SD |
|---|--------------|-------------------------------|-----------|
| SENDER (Name and Address)                                     | ADDRESSEE (N | lame and Address)             |           |
| Ramball Jewelry Store,<br>120 West 4th St.,<br>Bethlehem, Pa. |              | deshu,<br>XXI, NYC NY<br>Ave. |           |
| <b>`</b>  | . 7          | C.O.D. NUMBER                 |           |
| Yo:   |              | INSURED NUMBER                |           |

Postal Operations Div., Philadelphia Region. C.O.D. NUMBER
INSURED NUMBER
REGISTERED NUMBER
DATE MAILED
3/5/69

The Postal Inspection Service is making an investigation with regard to the article described above with sender and addressee as shown. Please process any claim you have pending on this article and, as appropriate, complete Item 1 or 2. Then, sign, date, and return this form promptly to me. ADVISE ME BY RETURN MAIL IF THERE IS ANY REASON THE COMPLETED FORM CANNOT BE RETURNED WITHIN 5 DAYS.

7/1/69 Inspector Barrow's report of 6/30/69 forwarded to you yesterday.

(Inspector in Charge) to Information Turnished

|   |                              |                           | // (inspector in charge) // ugi               |
|---|------------------------------|---------------------------|---|
| by the Philadel   | ceipt of the phia Inspendent | his claim.<br>ction Servi | Information Turnished ce indicates report due |
| Ramball Jewelry Store   | * 1000                       | ON (Date)<br>7/8/69       | 03-557  |
| 2. CLAIM NOT RECEIVED. (DO NOT ADJUL<br>POSTAL INSPECTOR, FI DIVISION, WASH | OICATE ANY SUBSE             | QUENT CLAIM WITHO         | OUT FIRST CORRESPONDING WITH THE CHIEF        |
| DATE NAME (Sig  | nature)                      |                           | Director, Postal Oper                         |

July 8, 1969

N. L. Hummel

Director, Postal Opers.Di

POSTAL DATA CENTER - Please furnish information requested below and return completed form to: Chief Postal Inspector, FI Washington, D. C. 20260 INSURED/COD - (From Form 3819) REGISTERED (From Form 565) VALUE (Item 6) ARTICLE COMMERCIALL VALUE (Item 6) SURED (Item 5) \$1656.21 PAYEE'S NAME & ADDRESS (Item 7) MINGHLL SEWELLY W. 411 TALC 1121 Pr. 15615 AMOUNT TO BE AMOUNT TO BE PAID (Item 39) POSTAGE REFUND POSTAGE REFUND TOTAL AMOUNT TOTAL AMT. (Item 33) (Item 34)

1000.00 · 1000.00

JUL 29 1969

INFORMATION FURNISHED BY (Name and Title)

CLAIMS EXAMETER

NEW YORK, N. Y. 10001

To:

DATE

| SUPE Complete form and send to Inspector in Charge at  |  |
|--|--|
|  | (City, State and Zip Code)   |
| DECLARATION OF SENDER  | 11. CASE NO.   |
| Complete Items 2 through 10  |  |
| SON FOR CLAD! (Check ene)  |  |
| CONTENTS HESDIG COMPLETE DAMAGE  | PARTIAL DAMAGE   NO COD RENITTA  |
| ARTICLE COMMERCIALLY INSURED ETTHER BY YOU OR ADDRESSEE  | 7 (If yes, give policy and the name and aldress of   |
| i. Interes   | ance company and emount of insurance said, If way)   |
| 25 Mo  |  |
|  |  |
| NAME AND ADDRESS (Should be the same as the potum address which was  | se pieced on the article)  |
| Ramball's Jevelry  |  |
| Bethlehsa, Pa. 18016   |  |
| AMD ADDRESS OF ADDRESSEE (Short be some as shown on the article)   | ·  |
|  |  |
| Cyril Hadssker   |  |
| 580 Fifth Ave.   |  |
| New York, N. Y. 1036   |  |
| EELOT ARTICLES WITCH WERE LOST, MESS VG, OR CAMAGED (ON- VA  | sice, cest of depileation, etc. If claim to for dem.ce.  |
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| CHECK / CHI WHEY PAD ON  | TOTAL ANDUST CE  |
| CHECK //CHI PART ON  | TOTAL ANDUST CE  |
| CHICK FEW PORRY PAD ON CLAPH CHOULD BE MADE Ramball Jenthy 8 6   | me : /C-00 OC  |
| CHECK / CHI WHEY PAD ON  | me : /C-00 OC  |
| CHICK PERIODERY PAD ON CLAPACION SENADO RANGE TO (MADON) 129 91 1/ the file Burger Barrer Con Senado Range Con Code (Madon) 129 91 1/ the file Burger Code (Madon) 129 91 1/ the file Burger Code (Madon) Range Code (Madon) 129 91 1/ the file Burger Code (Madon) Range Code (Madon)  | = 1000 00<br>1000 00   |
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| CHICK FERTINEY PAID OF CLASS CONTROL OF SENDING STATE OF SENDING STRUCTURE OF SENDING STRUCTURE OF SENDING FOR THE SENDING SEN | rely Stone Par Factory of 24 Codes   |
| CHICK PCALLENEY PAD ON CHARLETO (NAME) FAD ON ABLE TO (NAME)   12 G 21 1/4/4 St. But  E 6-5-6 J 10. SIGNATURE OF SENDER  POSTULITUR-MAILING OF FICU  (Complete borne 11 through 23)  41-0636-0   | rely Itom Pr farly office,  11. POST OFFICE (CUT, SING ON 21, Code)  Bothlehem, Pr. 18016  |
| CHICK FER WHEY PAD ON CHAPTONIOUED BE MADE RANDE REMAINED JUNEAU JUNEAU STATE  | rely Stone Par Factory of 24 Codes   |
| CHICK FOR PORRY PAID ON CLAPIC DICTORNAL DES MADE RANGE LA   | Total Another Co<br>1. Total Another Co<br>1. Total Mollow Particles (Corp. State ont 21, Code)<br>11. POST OPPICE (Corp. State ont 21, Code)<br>Detailed (Corp. State ont 21, Code)<br>Detailed (Cont. State ont 21, Code)<br>Unit) 14. Date Mail Co (Month, day, year, hour)   |
| CHICK FELL PONEY PAID ON CLAPIC DIOUNDER MADE REMADE REMADE SENT TO (NAMELE) 129 21 1/24 1 10. SIGNATURE OF REMADE  6-5-6 1 10. SIGNATURE OF REMADE  POSTPULTUR-MAILING OFFICE  (Complete learne 11 through 23)  MILED C.O.D. 13. PHENE MAILING OFFICE  1120 C.O.D. 13. PHENE MAILING OFFICE  Main Office on   | rely Itom Pr farly office,  11. POST OFFICE (CUT, SING ON 21, Code)  Bothlehem, Pr. 18016  |
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COSTMANTER-OFFICE OF ADDRESS

ALL POST PETER (CHT, Clare and Zip Com) (Complete frame 24 through 28)

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CONTRACTOR STREET CAST & MANUAL

□ x23 ∑ 100 In solv 12 the September of Portuster

- MAY : 3 1959 -

DECLARATION OF AUDRESSEE

(Complete Items 29 through 32)

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25. DATE SIGNED

Post Ferm 506 Possities are provided for in third felow, fictilities, or fraudulent Sev. 1951 Statement in conception with this type of childs. statement in connection with this type of chim.

MR. I WELSHER, SUPT.

PLEASE BE ADVISED

THAT ON THE ABOVE DATE AT SAM

I FOUND WRAPPER AND TOP FLAP

OF JEWELERY BOX UNDER MY WORK

DESK. I TURNED IN WRAPPER AND

FLAP TO THE SUM- OFFIRE.

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TO 663-5 AVR.

CLERK Alphinus & June

Bolest B. Fisher from 8/9/26
Marian J. Bryant